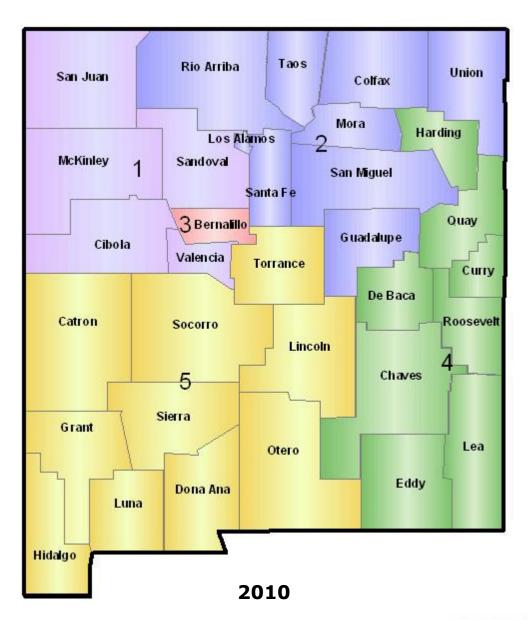
HIV/AIDS Services

Funded Agency CAREWare Manual The Basics of CAREWare

State of New Mexico

Department of Health Public Health Division Infectious Disease Bureau







Background	1
Technical Assistance/Help	1
New Mexico CAREWare First Call for Assistance	1
HRSA Resources	1
What is CAREWare?	2
Overview of CAREWare	2
How CAREWare Data is Used	2
Safeguarding Client Confidentiality	3
Words and Phrases to Know in CAREWare	4
Tiers	4
Domains	4
Cross-Provider and Provider-Specific Information	5
CAREWare Data Entry Features	5
Getting Ready for New Mexico CAREWare	6
User Requirements to Access New Mexico CAREWare	6
Establishing New Accounts	
Maintaining User Accounts	7
Workstation Requirements to Run CAREWare	7
Logging in to New Mexico CAREWare	8
CAREWare Passwords	10
Changing Your CAREWare Password	10
Password Requirements	11
Other Information	11
CAREWare Timeout	12
Data Entry Policy	13
Adding New Clients, Finding Clients, and Deleting Clients	
Adding New Clients to CAREWare	
Finding Clients in CAREWare	
The Client Record	
View Only Permissions	17
View/Edit Permissions	
Client Record Permissions	
Client Demographics	22

The allocated and the Library Control of the Contro	22
•	22
Client ID	
Ethnicity	
Race	_
HIV Status HIV+ Date	
AIDS Date	
HIV Risk Factors	
Common Notes, Provider Notes, and Case	e Notes 24
Common Notes	
Provider Notes	
Case Notes	
Client Services	25
Entering Client Vital and Enrollment State	us 25
Standardized State-wide Service Codes	
Core Medical Service Codes	
Support Service Codes	
Entering Client Services	28
Annual Review Data	
Annual Tab	
Quarterly Tabs	
Entering Clinical Information	31
	_
_	
Rapid Entry Screens in Clinical Encounter	rs 31
Rapid Entry Screens in Clinical Encounter	rs 31 31
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry	7s
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry	31 31 31 31 31 31 31 32
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications	31
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications	31
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications	31
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error	31
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error	31
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error	31
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error Labs Labs Rapid Entry Entering Labs through Rapid Entry	31
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error Labs Labs Rapid Entry Entering Labs through Rapid Entry Screening Labs	31
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error Labs Labs Rapid Entry Entering Labs through Rapid Entry	31 32 33 33 35 35 36 37 38 38 38 38
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error Labs Labs Rapid Entry Entering Labs through Rapid Entry Screening Labs Screening Labs Rapid Entry Entering Screening Labs through Rapid Entry Entering Screening Labs through Rapid Entry	31 31 32 33 33 35 36 37 38 38 38 38 38 38
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error Labs Labs Rapid Entry Entering Labs through Rapid Entry Screening Labs Rapid Entry Entering Screening Labs through Rapid Entry Entering Screening Labs through Rapid Entry Screenings	31 31 32 33 33 35 36 37 38 38 38 38 38 40 40
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error Labs Labs Rapid Entry Entering Labs through Rapid Entry Screening Labs Screening Labs Rapid Entry Entering Screening Labs through Rapid Entry Entering Screening Labs through Rapid Entry	31 31 32 33 33 35 36 37 38 38 38 40 40 40 40
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error Labs Labs Rapid Entry Entering Labs through Rapid Entry Screening Labs Rapid Entry Entering Screening Labs through Rapid Entry Screening Screening Labs through Rapid Entry Screening Screening Labs through Rapid Entry Entering Screening Labs through Rapid Entry Entering Screening Labs through Rapid Entry Entering Screening Labs through Rapid Entry	31 31 32 33 33 35 36 37 38 38 38 38 38 38 38 38 38 38 38
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error Labs Labs Rapid Entry Entering Labs through Rapid Entry Screening Labs Screening Labs Rapid Entry Entering Screening Labs through Rapid Entry Screening Screening Labs through Rapid Entry Entering Screening Labs through Rapid Entry Immunizations	31 31 32 33 35 36 37 38 38 40 40 40 42 42 42 42 42 42 42 42 42 42 42 42 42 43
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Change Dose Correcting a Data Error Labs Labs Rapid Entry Entering Labs through Rapid Entry Screening Labs Screening Labs Rapid Entry Entering Screening Labs through Rapid Entry Screening Screening Labs through Rapid Entry Entering Screening Labs through Rapid Entry Immunizations Immunizations Immunizations Immunizations Immunizations	31 31 32 33 35 36 37 38 38 40 40 40 42 42 42 42 42 42 44 44
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error Labs Labs Rapid Entry Entering Labs through Rapid Entry Screening Labs Screening Labs Rapid Entry Entering Screening Labs through Rapid Entry Screening Screening Labs through Rapid Entry Immunizations Immunizations Immunizations Rapid Entry Entering Immunizations through Rapid Entry Entering Immunizations through Rapid Entry	31 31 32 33 35 36 37 38 38 38 40 40 42 42 42 42 44 44 44 44 44
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error Labs Labs Rapid Entry Entering Labs through Rapid Entry Entering Labs Rapid Entry Entering Screening Labs through Rapid Entry Entering Immunizations Immunizations Immunizations Rapid Entry Entering Immunizations through Rapid Entry Entering Immunizations through Rapid Entry Entering Immunizations through Rapid Entry Diagnoses	31 31 32 33 35 36 37 38 38 40 40 42 42 42 42 42 44 44 44 44 44 44 44 44 44 44 46
Rapid Entry Screens in Clinical Encounter Medications Medications Rapid Entry Entering Medications through Rapid Entry Starting Medications Stopping Medications Change Dose Correcting a Data Error Labs Labs Rapid Entry Entering Labs through Rapid Entry Entering Labs Rapid Entry Entering Screening Labs through Rapid Entry Immunizations Immunizations Immunizations Rapid Entry Entering Immunizations through Rapid Entry Entering Immunizations through Rapid Entry	31 31 32 33 35 36 37 38 38 40 40 40 42 42 42 44 44 46 46 46 46

Referrals	48
Types of Referrals in CAREWare	48
Important Difference between Service and Referral	48
External Referrals	49
Pregnancy	52
Enrollment Tab (Custom Subform)	53
Scheduler	54
Scheduling Appointments	54
Viewing Appointments	59
Ordering Services	61
Adding an Order	62
Completing Orders	63
Performance Measures	64
Running Reports in CAREWare	65
CAREWare Report Permissions	65
Client Report	
Financial Report	69
Clinical Encounter Reports	71
Mailing Labels	71
Exporting Reports	73
Administrative Permissions	75
APPENDIX A: State-wide CAREWare User Registration Form	77

Background

This document will provide general guidance in entering data into Ryan White CAREWare for compliance with the reporting requirements of the NMDOH HIV Services Program and HRSA, the federal funding agency. Users are encouraged to consult this document in conjunction with the Program's Funded Agency CAREWare RSR Data Entry Manual document in order to optimize reporting compliance.

New Mexico's HIV Services Program uses Ryan White CAREWare in a centralized "real-time" widearea network configuration. Remote users only need to have the "client tier" or user interface installed on their local workstation. By logging into the user interface, the client tier will connect to the "business tier" which holds all the rules for who can access what data, where to store data once it is entered into CAREWare, and other key activities. The business tier stores the data in a database (the "data tier"); both the business tier and the data tier are stored on servers at NMDOH.

Technical Assistance/Help

New Mexico CAREWare First Call for Assistance

For questions and technical assistance regarding CAREWare, please contact the New Mexico CAREWare Coordinator, Jennifer L. Eggerton at (505) 476-3610 or Jennifer.Eggerton@state.nm.us.

For user account lock outs, the NMDOH Help Desk is available

User Account Lock Outs and **Password Changes**

NMDOH Help Desk

7:00 a.m. to 6:00 p.m. Monday through Friday (800) 280-1618 or (505) 476-8526 Option 1

HRSA Resources

For more general information about the standard Ryan White CAREWare application

CAREWare Help Desk

(877)-CWHELP1 or (877)-294-3571 Email <u>cwhelp@jprog.com</u>

Monday - Friday 12:00 - 5:00 p.m., Eastern Standard Time

For updated information on Ryan White CAREWare, visit the Ryan White CAREWare website at http://hab.hrsa.gov/careware.

What is CAREWare?

Overview of CAREWare

CAREWare is a free, scalable software for managing and monitoring HIV clinical and supportive care and will quickly produce a completed Ryan White HIV/AIDS Annual Data Report (RDR) and the new Ryan White HIV/AIDS Program Services Report (RSR) for meeting reporting requirements to the federal grantee, the U.S. Department of Health and Human Services, Health Resources and Services Administration, HIV/AIDS Bureau (DHHS/HRSA/HAB).

New Mexico CAREWare is a secure, centralized software application designed to report client-level data from HIV Services Program funded through Part B of the Ryan White HIV/AIDS Treatment Modernization Act. The majority of the HIV/AIDS Program funds support primary medical care and essential support services. New Mexico CAREWare is used to report clients served by our providers funded through the New Mexico Department of Health Public Health Division, the Part B grantee.

How CAREWare Data is Used

Demand for HIV-related services continues to grow, and the system of services available to persons with HIV disease is becoming more complex. Evaluating the success of these programs in meeting the needs of New Mexicans living with HIV disease, and reporting the activities of our providers to the federal government, state legislature, and community members are vital functions of the NMDOH. Through provider agreements and in collaboration with our providers, the HIV Services Program is responsible for collecting, analyzing, and reporting the client-level data on behalf of the NMDOH.

As the range of services grows more complex, and needs continue to outweigh resources, monitoring the success of the entire system becomes more important. A system-wide evaluation allows key stakeholders to:

- Target populations most in need, especially those not receiving services;
- Report accurate data to State legislature, HRSA, Congress, and other funding bodies;
- Help community providers to better meet the needs of persons with HIV disease through the evaluation of their services in the context of the entire services system; and
- Strengthen the effort to work for changes in broader health care and social services system by providing accurate analysis of the needs of New Mexicans with HIV disease.

This type of system-wide evaluation and analysis requires several components, including the need to collect demographic, service utilization, and clinical data of clients receiving services funded by NMDOH and Ryan White Part B.

The client-level data management system will allow the HIV Services Program, NMDOH, and other planning bodies to answer important evaluation questions, such as:

- How many people are served through the HIV/AIDS Services Program? What are the demographic characteristics of these persons?
- How do these people compare with the entire population of persons with HIV in New Mexico?
- How many people served through the HIV/AIDS Services Program are seeing a medical provider for their HIV care? What are the characteristics of those who are not in care?
- Are people receiving case management more likely to access additional clinical and support services?

Safeguarding Client Confidentiality

Safeguarding the confidentiality of clients is of critical importance, at both the local and federal level. In order to maintain client confidentiality, the following will occur:

- CAREWare's federal client-level data reporting module for the Ryan White Services Report (RSR) contains an algorithm that de-identifies client data
 - o Client names are not reported to HRSA. Client-level data is reported to HRSA using an encrypted unique client identifier.
 - The full date of birth is not reported to HRSA. Only the year of birth is reported to HRSA.
 - Complete client zip codes are not reported; instead a geographic unit code comprised of the first three digits of the zip code in CAREWare is reported.
- Data sharing and user permissions in CAREWare are set so that a client name is only shared between HIV/AIDS Services Program-funded providers serving that client. Access to client names by NMDOH staff is limited to those few who have job-related need (program enrollment, technical assistance, data management, system administration, and crossreference with the Electronic HIV/AIDS Reporting System).
- Client-specific information (using a unique client ID only) from CAREWare is not shared with any entity other than NMDOH, HRSA, or consultants specifically contracted, in part or whole, for data analysis.

Provider Responsibilities for Safeguarding Client Confidentiality

- Provider's are required to have timeouts set up on workstations so that after 10 minutes of inactivity the workstation locks and the user has to log back in to access the workstation.
- Users are required to lock their computers when they leave their desks for any period of time.
- When meeting with clients, users are required to ensure that they are either logged out of CAREWare or they have the record of the client with whom they are meeting open. Under no circumstances will providers leave any person unattended with CAREWare open and/or their workstations unlocked.
- Providers will not share their user names or passwords with others.
- Providers will not leave their user name and password written down where others can
 access it, either in an open area or in an area where the user name and password may be
 easily discovered.
- Providers are required to notify NMDOH within one (1) business day of any staff member that has left their agency.
- Provider staff with administrative permissions in CAREWare are responsible for disconnecting a user immediately when necessary and appropriate.

Words and Phrases to Know in CAREWare

Tiers

CAREWare is comprised of three parts – the client, business, and data tiers:

The **client tier** is the "front end" of CAREWare that sits on the user desktop computers and allows them to request or submit data.

The **business tier** is the "middleman" that takes requests from the client tier and either denies them (if the user doesn't have permissions, for instance) or accepts them and transmits the information between the data tier and the client tier.

The data tier is the "back end" of CAREWare and is a SQL Server database.

Domains

CAREWare uses two types of domains – **Central Administration** and **Provider**:

Central Administration: NMDOH functions as the central administrator. Users in the Central Administration (CA) domain set up users and grant/revoke permissions in each provider domain, establish contracts and services, and perform a variety of oversight tasks (audit reports, quality reports, etc.). Users within a CA domain cannot add or edit client data from within Central Administration – they can only view client records. However, users can log into a provider domain to edit client records if needed (e.g. a name was entered incorrectly).

Provider: A provider domain is set up for each funded agency. Users at each provider will only log into their own provider domain. Users in a provider domain are able to enter and edit client data, create and run reports, and perform other functions based on the permissions assigned by the central administrator.

Cross-Provider and Provider-Specific Information

Information in CAREWare may be cross-provider (shared across providers) or provider-specific:

Cross-Provider: Demographic data, including all patient identifiers (name, date of birth, address) and Annual Review information (income, insurance, etc.) are cross-provider: they are not "owned" by a specific provider. For example, say a user at Provider #1 changes a client's address. Let's say that Provider #2 shares that same client, and accesses that client's record on the network. If a user at Provider #2 goes into that client's record, they will see the change of address made by the user at Provider #1. The second user could change the address as well, because the demographic fields are common across all providers on the network who have that client within their domain.

Provider-Specific: CAREWare handles client service and clinical information differently from common demographic data described above: service records and clinical information are provider-specific. What this means is that even if two providers serve the same client, and elect to share data over the network, these providers can only view the other's data on that client, but never edit or change it. These fields are owned by the provider who entered them.

CAREWare Data Entry Features

Common data entry features in CAREWare:

Туре	View	Description
Text Box		Allows single line of text entry or display
Text Area		Allows multiple lines of text entry or display
Check Boxes	Option 1	Allows selection of 1 or more options
	Option 2	
	Option 3	
Radio Buttons	Yes	Allows selection of 1 option
	C No	
	C Does Not Apply	
Drop Box	Choice #1	Allows selection of 1 option from a pull-down menu
Button	New Service	Executes a CAREWare function

Getting Ready for New Mexico CAREWare

User Requirements to Access New Mexico CAREWare

In order to obtain a user ID and password, provider staff must complete their agency's CAREWare training and Client Privacy/HIPAA training and have a signed confidentiality agreement on file with their employer. Prior to be granted access to the state-wide CAREWare system, potential users are required to present documentation to their Provider Authorized Representative that they have successfully completed the required training.

The provider agency will maintain the documentation of CAREWare and Client Privacy/HIPAA training and the ongoing, annual confidentiality agreements. The Provider's Authorized Representative is required to complete the registration form (Appendix A) any time a user is added, leaves their agency, or changes roles. The Provider's Authorized Representative will mail the original registration form to the New Mexico CAREWare Coordinator at the address shown on the form for processing. NMDOH will keep the original user agreement on file.

In order to maintain a user ID and password, the Provider's Authorized Representative will submit a list of users for that agency who have completed that fiscal year's HIPAA training and signed a current confidentiality agreement with their agency.

In the event that a user must be locked out/disconnected from CAREWare immediately, the Provider's Authorized Representative is responsible for disconnecting the user through Administrative Options > System Information > Disconnect User and immediately contacting the NMDOH Help Desk at (800) 280-1618 or (505) 476-8526 (use option 1) and/or CAREWare Coordinator at (505) 476-3610 so the user's account can be locked. The Provider's Authorized Representative is responsible for ensuring that the disconnected user does not access CAREWare until the account is confirmed locked by the NMDOH Help Desk or the New Mexico CAREWare Coordinator.

Establishing New Accounts

In order to establish a new account to access New Mexico CAREWare, new users must complete the following steps:

- 1. Complete annual client privacy/HIPAA training at the provider's agency. Agencies must maintain records of annual client privacy/HIPAA training.
- 2. Sign the provider agency's annual Client Data Privacy Confidentiality Agreement.
- 3. Complete the User Registration Form and forward to it to the Provider's Authorized Representative for signature (Appendix A).
- 4. The Provider's Authorized Representative will complete and sign the form then mail the original user registration form to the New Mexico CAREWare Coordinator at the address shown on the form. Providers should allow two (2) business days after the registration form is received by the New Mexico CAREWare Coordinator for processing.

Once the new user account has been established, the New Mexico CAREWare Coordinator will contact the new user and provide a user name and a temporary password. New users will need to change their passwords the first time they log into CAREWare. The New Mexico CAREWare Coordinator will also notify the Provider's Authorized Representative via email that the user account has been established.

Maintaining User Accounts

Following the initial set-up as a CAREWare user, users will be required to complete the following steps each fiscal year:

- 1. Complete the provider's annual client privacy/HIPAA training.
- 2. Sign the provider agency's annual Data Privacy Confidentiality Agreement.
- 3. To maintain user access to CAREWare, by August 1 of each fiscal year the Provider's Authorized Representative will complete and sign a form that lists the names of all staff that have completed annual HIPAA training and signed the data privacy confidentiality agreement during the fiscal year. The Provider's Authorized Representative will mail the original list to the New Mexico CAREWare Coordinator at the address below:

New Mexico Department of Health Harold Runnels Building PHD/IDB HIV Services - ATTN: J. Eggerton 1190 St. Francis Drive, Suite S-1205 Santa Fe, New Mexico 87502-6110

Workstation Requirements to Run CAREWare

Recommended:

96 MB RAM, 1GHZ or faster processor and 1GB of hard drive space

Minimum:

32 MB RAM, 133mhz processor and 50mb of hard drive space

Windows® 98 and up

Microsoft Data Access Components (MDAC) 2.6

Microsoft .NET Framework

Logging in to New Mexico CAREWare

1. Double click on the Run RW CAREWare icon on your desktop.



- 2. The RW CAREWare login window will display on your screen. Type in the following information:
 - a. Your New Mexico CAREWare User Name (provided to you by NMDOH)
 - b. Your New Mexico CAREWare Password (provided to you by NMDOH)

Click Login.



¹ Most Funded Agencies use two CAREWare databases – the NMDOH CAREWare database and an internal database. Provider Database Managers should ensure that users of the NMDOH database know the appropriate circumstances for using the NMDOH CAREWare database and how to switch between databases.

3. After logging in to CAREWare, the main menu will appear. This menu allows you to navigate to different areas of CAREWare, perform certain functions, and read system messages. The options available to each user are based on the assigned user type and permissions granted by the central administrator.



CAREWare Passwords

Changing Your CAREWare Password

You should change your password after you initially receive it from NMDOH and have logged in for the first time, and any time you feel your password may have been compromised.

1. Select My Settings from the Main Menu screen in CAREWare.



2. Select **Change My Password** from the My Settings screen.



3. Enter your new password twice and select **Change Password**.



NOTE: You will also be required to change your CAREWare password every 30 days. When it is time for this to happen, you will get a message when you're logging into CAREWare that says your

password has expired. The Change My Password screen will display. After changing your password, you will be asked to log in with your new password.

Password Requirements

- Minimum password length is 8 characters.
- Passwords must contain at least 2 non-alpha characters (i.e., numbers, special characters).
- Maximum time to keep the same password is 30 days. You will receive a message when it is time to change your password.
- Passwords must not be communicated by e-mail.
- Passwords must not be disclosed to anyone other than the user.
- Passwords should always be changed after the system administrator issues a temporary password.

Other Information

- Idle user account time out for the CAREWare application is 10 minutes.
- One connection is allowed per user.
- The CAREWare account will be locked after three (3) consecutive, unsuccessful login attempts. When an account is locked, the user must contact the NMDOH Help Desk to have the account unlocked.

Other Important Security Points to Remember

- Do NOT share your login information with others.
- Do NOT distribute your CAREWare user name password to others.
- Do NOT write your CAREWare user name or password where it can be accessed by others.
- Do NOT walk away from your computer with the CAREWare browser still up on your screen.
- Do NOT leave your computer unattended before logging off.
- Do NOT close your browser or shut down your computer before logging out of CAREWare.

You have three (3) attempts to enter your CAREWare user name and password. If you enter your user name and/or password incorrectly, three (3) times, the NMDOH Help Desk will need to reissue a temporary password to you before you can attempt to log in again.

If you are locked out of your CAREWare account, contact the NMDOH Help Desk Monday through Friday 7:00 a.m. to 6:00 p.m. at (800) 280-1618 or (505) 476-8526 and select option 1.

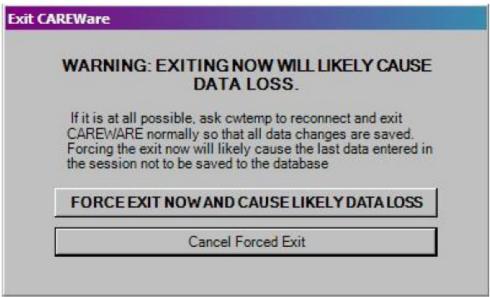
CAREWare Timeout

For security reasons, CAREWare will automatically time out after 10 minutes of inactivity. If this happens, you will receive and error message and you will have to log back in to continue.



Re-entering your password and clicking **Reconnect** will take you back to the screen you were working on before your session became active.

If you click **Exit CAREWare**, you will receive a warning that exiting now will likely cause data loss. If you are sure that you were not in the middle of something you need to save, you can go ahead and click **Force Exit Now and Cause Likely Data Loss**. Otherwise, click **Cancel Forced Exit** to return to the CAREWare Data Protection Service window where you'll be asked to re-enter your password in order to re-connect.



Data Entry Policy

Users are required to enter all demographic, service utilization and clinical data fields within 30 days of the date of service. Funded agencies may implement policies that are more stringent than this policy (sooner than 30 days), but may not implement policies that are more lenient (later than 30 days).

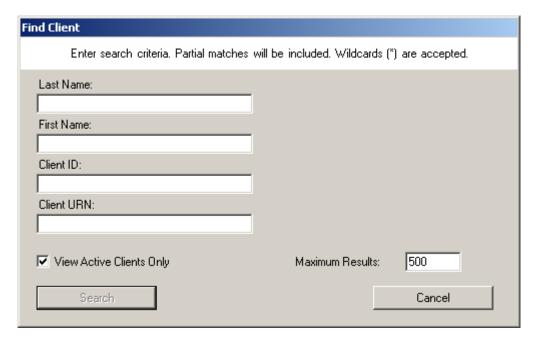
Adding New Clients, Finding Clients, and Deleting Clients

Adding New Clients to CAREWare

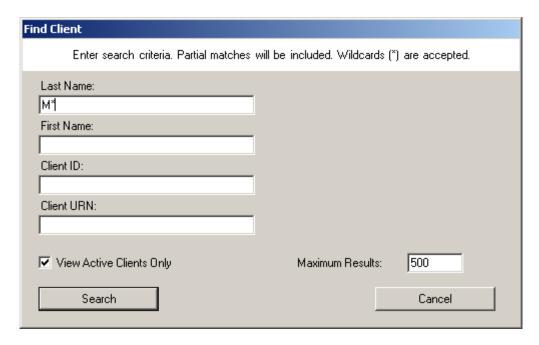
New clients are added to CAREWare (including provider domains) by NMDOH when the ACCESS application is approved for the new client. Providers can expect clients to be added to CAREWare generally within two (2) business days of the ACCESS application being approved.

Finding Clients in CAREWare

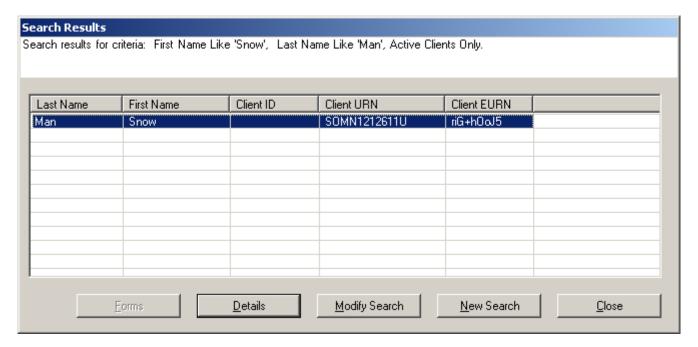
To search for a client, select **Find Client** from the Main Menu. Enter search text into any of the fields: **Last Name**, **First Name**, **Client ID** (unique to provider), or **Client URN** (unique record number created by CAREWare) and select **Search**.



You can search by just the first letter of the name or you can search by the URN or the encrypted URN.



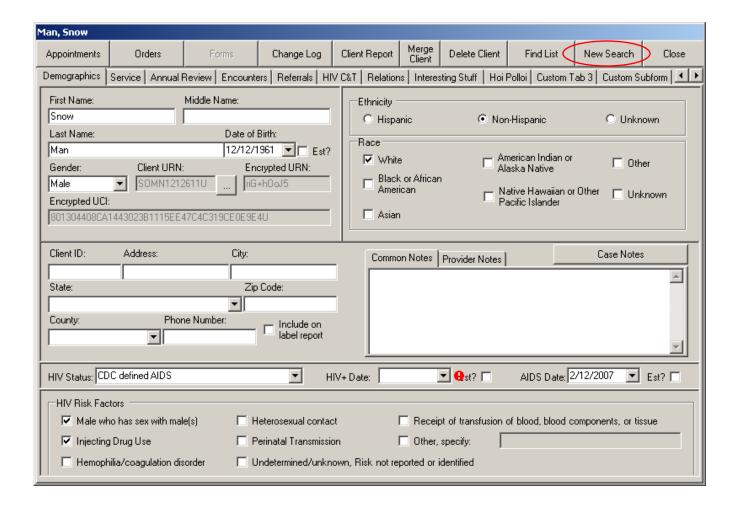
The results screen will provide a list of clients within the provider domain who match the criteria entered into the search screen.



Select the record you are looking for. To open the record you can double-click the name or select **Details**.

If the results do not contain the client you are searching for, select **Modify Search** and edit your search criteria, including the **View Active Clients Only**.

To begin again, select **New Search** and to leave the search process, select **Close**. You can also access the **Find Client** function from the client screen by selecting **New Search**.

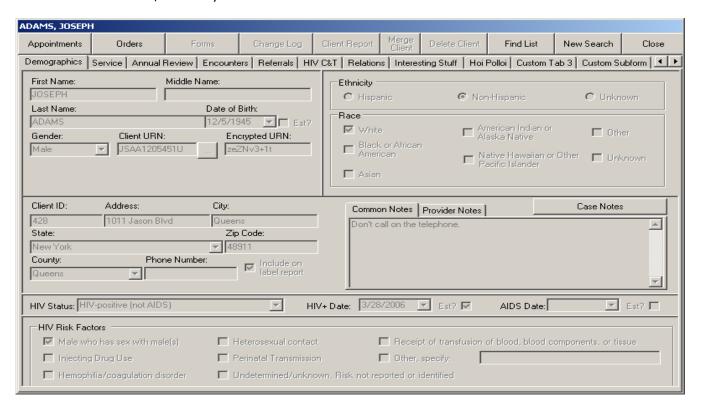


The Client Record

Based on their permissions, users will have two types of access to areas of the client record in CAREWare: **View Only** and **View/Edit**.

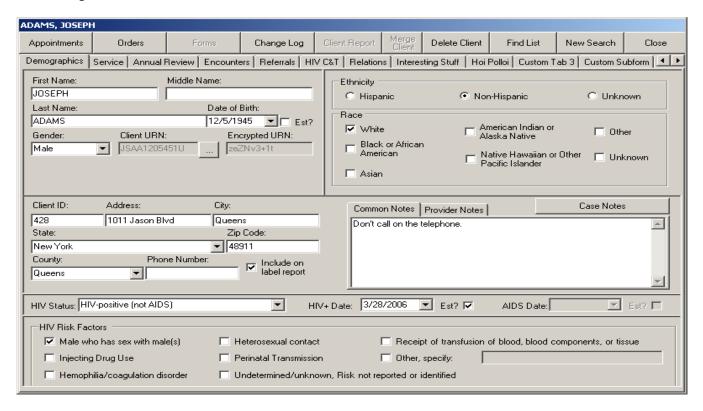
View Only Permissions

Areas of the client record that allow users to have view only access appear greyed out. Users can read the information, but they cannot edit the information.



View/Edit Permissions

Areas of the client record that allow users to have view/edit access appear white. Users can read and change the information.



Client Record Permissions

The following permissions are used for client records in New Mexico CAREWare:

Field/Function	NMDOH Data Manager	Provider Data Manager	Provider Standard Users
DEMOGRAPHICS TAB			
Add Client	√2		
Find/View Client	✓	✓	✓
Delete Client	√3	√4	
View Change Log	✓		
Edit URN Fields (name, date of birth, gender)	✓		
Edit Address/Phone	√ ⁵		
View Address/Phone	✓	✓	✓
Edit Race/Ethnicity	√6		
View Race/Ethnicity	✓	✓	✓
Edit Risk Factors	✓	✓	✓
View Risk Factors	✓	✓	✓
Edit HIV Status	✓	✓	✓
View HIV Status	✓	✓	✓
COMMON NOTES, PROVIDER NOTES, AND CASE	NOTES		
Edit Case Notes	✓	✓	✓
Add/Append Case Notes	✓	✓	✓
View Case Notes	✓	✓	✓
Edit Common Notes	√7		
View Common Notes	✓	✓	✓
Edit Provider Notes	✓	✓	✓
View Provider Notes	✓	✓	✓
Add/Edit Case Note Template	✓	✓	✓

² New clients are added to CAREWare when the ACCESS application is approved by NMDOH. Clients who transfer between HMAs will be added to the new provider's domain when the HMA Transfer form has been fully completed.

³ Clients will not be routinely deleted from CAREWare. Only under specific circumstances (i.é., a duplicate client was added in error) will clients be deleted from CAREWare.

⁴ Deletion from provider domain only.

⁵ Client address and phone information will be updated when NMDOH receives a completed ACCESS Update form.

⁶ Race/ethnicity will be updated when the ACCESS application is approved by NMDOH.

⁷ This limitation is based only on the common notes permissions being incorporated into the demographics permissions.

SERVICE TAB			
Edit Vital/Enrollment Status (unique to domain)	✓	✓	✓
View Vital/Enrollment Status (unique to domain)	✓	✓	✓
Add/Edit Service Records	✓	✓	✓
View Service Records	✓	✓	✓
Delete Service Records	✓	✓	✓
Add/Edit Amount Received (optional field for providers)	✓	✓	✓
View Amount Received (optional field for providers)	✓	✓	✓
Delete Amount Received (optional field for providers)	✓	✓	✓
ANNUAL REVIEW TAB			
Edit Quarterly Data (optional for providers)	\checkmark	✓	✓
View Quarterly Data (optional for providers)	✓	✓	✓
Edit Quarterly Custom (optional for providers)	✓	✓	✓
View Quarterly Custom	✓	✓	✓
Edit Insurance/Poverty	√8		
View Insurance/Poverty	✓	✓	✓
Edit Annual Custom (optional for providers)	✓	✓	✓
View Annual Custom (optional for providers)	✓	✓	✓
ENCOUNTERS (CLINICAL)			
Add/Edit Vital Signs (optional for providers)	✓	✓	✓
View Vital Signs (optional for providers)	✓	✓	✓
Delete Vital Signs (optional for providers)	✓	✓	✓
Start Medications	✓	✓	✓
Stop Medications	✓	√	✓
Change Dose	✓	✓	✓
Correct Error	✓	✓	✓
View Medications	✓	√	✓
Add/Edit Labs, Screening Labs, Screenings, Immunizations, and Diagnoses	✓	✓	✓
View Labs, Screening Labs, Screenings, Immunizations, and Diagnoses	✓	✓	✓
Delete Labs, Screening Labs, Screenings, Immunizations, and Diagnoses	✓	✓	✓
Edit Hospital/ER Admissions (optional for providers)	✓	✓	✓
View Hospital/ER Admissions (optional for providers)	✓	✓	✓
Add Encounter (can be used in place of Rapid Entry)	✓	✓	✓
Add/Edit Allergies and Date ART Meds were 1 st Time Prescribed	✓	✓	✓
View Allergies and Date ART Meds were 1 st Time			

 $^{^{8}}$ Insurance, household income, and household size will be updated when the ACCESS application and/or Financial Update form is approved by NMDOH.

Prescribed			
REFERRALS ⁹			
Add/Edit External Referrals	✓	✓	✓
View External Referrals	✓	\checkmark	✓
Delete External Referrals	✓	✓	✓
Edit External Providers List	✓	✓	✓
Edit Referral Class List	✓	✓	✓
Activate External Providers	✓	✓	✓
PREGNANCY TAB			
Add/Edit Pregnancy Data	✓	✓	✓
View Pregnancy Data	✓	✓	✓
Delete Pregnancy Data	✓	✓	✓
Edit Prenatal Care Data	✓	✓	✓
View Prenatal Care Data	✓	✓	✓
RELATIONS (optional for providers) ¹⁰			
Create Dependent	✓	\checkmark	✓
Append Dependent	✓	✓	✓
Detach Dependent	✓	✓	✓
View Dependent	✓	✓	✓
CUSTOM DATA			
Edit Tab 1 (optional for providers)	✓	✓	✓
View Tab 1 (optional for providers)	✓	✓	✓
Edit Tab 2 (optional for providers)	✓	\checkmark	✓
View Tab 2 (optional for providers)	✓	✓	✓
Edit Tab 3 (optional for providers)	✓	✓	✓
View Tab 3 (optional for providers)	✓	✓	✓
Edit Custom Subform	√ ¹¹		
View Custom Subform	✓	✓	✓
APPOINTMENTS/ORDERS			
Add/Edit Appointment/Order	✓	√	✓
View Appointment/Order	✓	✓	✓
Delete Appointment/Order	✓	✓	✓
Set Client Use/Default Days	✓	✓	✓
View Client Use/Default Days	✓	✓	✓
View Performance Measures Tab	✓	✓	✓

⁹ Internal Referrals relate to providers within the New Mexico CAREWare wide area network. External referrals relate to organizations, providers, etc. outside the New Mexico CAREWare wide area network.

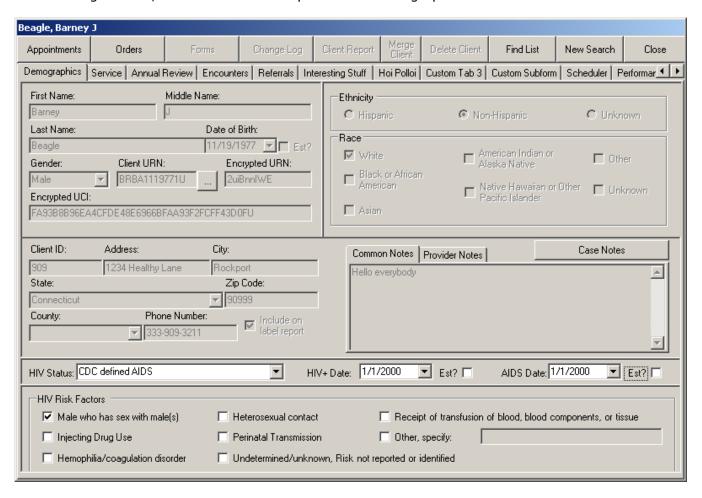
¹⁰ Relations can be set for clients that are within the provider domain and HMA-enrolled

¹¹ The CAREWare Custom Subform will be used by NMDOH to track enrollment information related to the HMA, IAP, ADAP,

and Dental programs.

Client Demographics

After finding a client, the client's file will open to the Demographics tab.



Contact Information

Maintained by NMDOH. The client's address, city, state, zip code, county, phone numbers, and mail/calls/message preferences are updated by NMDOH. Providers submit changes to these fields through the ACCESS application, Financial Update form, ACCESS Update form, IAP Application, and IAP Recertification.

<u>Include on Label Report</u>

Maintained by NMDOH. This checkbox indicates if the client receives mail. The field is updated by NMDOH when the client's contact information is added/updated.

Client ID

Maintained by NMDOH.

Ethnicity¹²

Maintained by NMDOH. The client's ethnicity is updated by NMDOH. This is the client's self-reported ethnicity. Providers report this information to NMDOH on the ACCESS application.

Race

Maintained by NMDOH. The client's race is updated by NMDOH. This is the client's self-reported race. Providers report this information to NMDOH on the ACCESS application.

HIV Status¹³

Maintained by the Provider. The client's current HIV Status is entered by the Provider. Only the following HIV Status options may be used by providers:

- HIV-positive (not AIDS)
- HIV-positive (AIDS status unknown)
- CDC-defined AIDS

If "CDC-defined AIDS" is selected, the CDC AIDS-defining condition must be entered in the clinical section of CAREWare.

HIV+ Date

Maintained by the Provider. The client's HIV+ Date is entered by the Provider. Enter the date the client was identified as HIV+. This date may be a client's estimate. For example, if a client says, "sometime in the middle of '86", enter "06/01/1986". If the date is an estimate, check the "Est?" box.

If a client self-reports an HIV+ diagnosis date that is different than what is shown in CAREWare, always use the earlier of the two dates. For example, if CAREWare shows a client's HIV+ date as 1/1/1990 and the client reports a diagnosis date of 2001, keep the 1/1/1990 date in CAREWare since it is the earlier of the two dates. Another example is if CAREWare shows a diagnosis date of 1/1/2005 and the client self-reports an HIV+ diagnosis date of 2003, change the HIV+ diagnosis date in CAREWare to 1/1/2003.

AIDS Date

Maintained by the Provider. The client's Enter the date the client was diagnosed with AIDS. This date must correspond to a date of a CDC AIDS-defining condition in the clinical section of CAREWare.

HIV Risk Factors

Maintained by the Provider. Check all the boxes that apply for HIV Risk Factors (modes of HIV transmission to the client). These entries should be based on client self-report. If you have a question about a mode of transmission that does not appear to fit in the categories, contact your HMA Liaison for guidance.

Men who have sex with men (MSM) cases include men who report sexual contact with other men and men who report contact with both men and women.

¹² Refer to the NMDOH Funded Agency RSR CAREWare Manual for HRSA's definitions related to ethnicity and race.

¹³ Part C of the ACCESS application requests the HIV status, HIV+ date, and AIDS date from clinical providers.

Injection drug user (IDU) cases include individuals who report use of drugs intravenously or through skin-popping.

Hemophilia/coagulation disorder cases include individuals with delayed clotting of the blood.

Heterosexual contact cases include individuals who report specific heterosexual contact with an individual.

Receipt of blood, blood components, or tissue cases include transmission through receipt of infected blood or tissue products given for medical care.

Mother with/at risk for HIV infection (perinatal transmission) cases includes the transmission of disease from mother to child during pregnancy. This category is exclusively for infants and children infected by mothers who are HIV-positive or at risk.

Other indicates the individual's exposure is known, but not listed above.

Undetermined/unknown, risk not reported or identified indicates the individual's exposure is unknown or not reported for data collection. This category should not be used by Providers.

Common Notes, Provider Notes, and Case Notes

Common Notes

Maintained by NMDOH. The Common Notes field can be used to collect additional information about the client. NMDOH enters the data in the Common Notes section and the information can be viewed by any agency that serves the client.

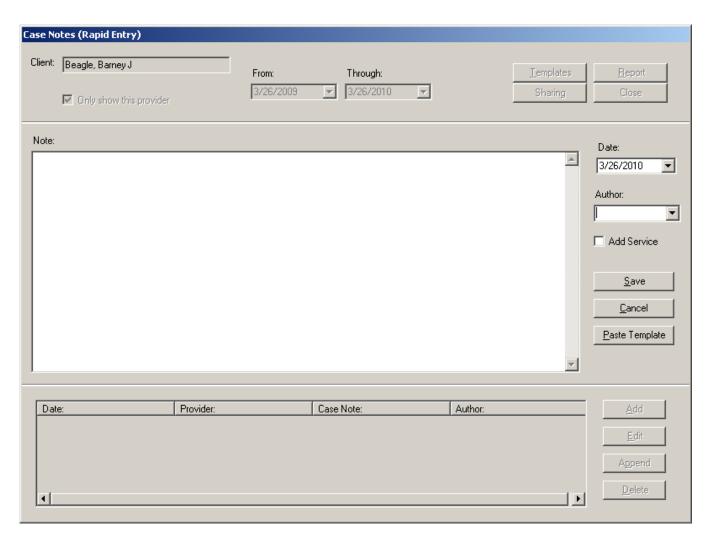
Provider Notes

Maintained by Provider. The Provider Notes field can be used to collect additional information about the client. The information in this field is only available to the agency entering the data.

Case Notes

Because of the potentially sensitive information collected in Case Notes, providers on the NMDOH CAREWare network will not have the ability to share case notes.

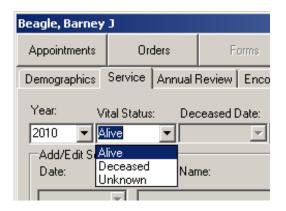
NOTE: If you are entering a long series of case notes at one sitting for one client, you may want to save your changes after each paragraph. This will help ensure there is no data loss during the time out process.

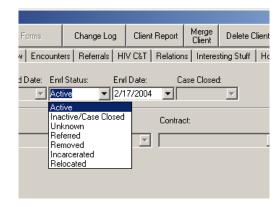


Client Services

Entering Client Vital and Enrollment Status

On the service tab, enter the client's vital status and enrollment status/date. The enrollment status/date is specific to each provider and does not necessarily reflect when the client is enrolled in the NMDOH HMA program.





Standardized State-wide Service Codes

The following standardized service codes are available in the state-wide CAREWare database. The specific service codes available for each provider are based upon the NMDOH approved line item budget of each provider. The exception to this is that the Office Visit service code under Ambulatory/Outpatient Medical Care is available to all providers for performance measures, but is defined as HMA-funded or non-funded based upon each providers approved line item budget. These service codes will be updated with each annual or interim update to provider line item budgets and/or state-wide performance measures.

Core Medical Service Codes

Service Code	HRSA Service Category
Office Visit	Ambulatory/Outpatient Medical Care
Labs	
Diagnostic	
Specialty Care	
High-risk Insurance Co-payments	Health Insurance Premiums and Cost Sharing
High-risk Insurance Deductibles	Assistance
High-risk Insurance Premiums	
Medicare Supplement Co-payments	
Medicare Supplement Deductibles	
Medicare Supplement Premiums	
Other Health Insurance Co-payments	
Other Health Insurance Deductibles	
Other Health Insurance Premiums	
Early Intervention Services	Early Intervention Services
Home Health Care	Home Health Care
Mental Health Services	Mental Health Services
Registered Dietician	Medical Nutrition Therapy
Nutritional Supplements	
Assessment	Medical Case Management
Acuity Scale	
Service Plan	
Coordination and Follow Up of Health Care	
Treatment Adherence Monitoring and Education	
Referral for Treatment Adherence Counseling	
Treatment Adherence Counseling	
Patient Care Conference	
Outpatient Substance Abuse Services	Outpatient Substance Abuse Services

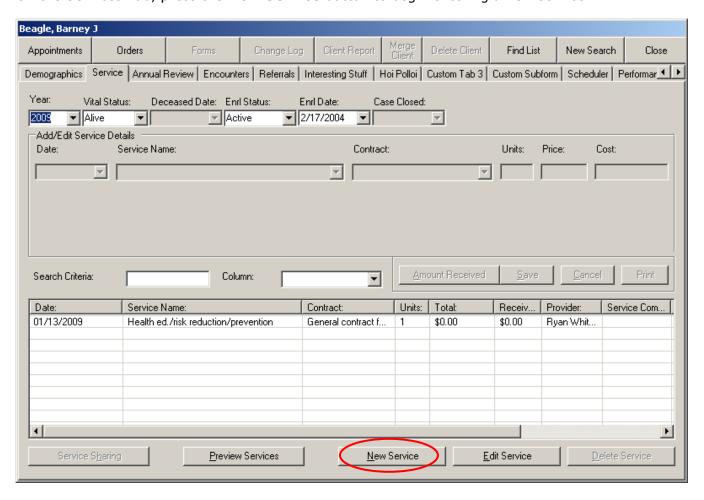
Support Service Codes

Child Care Services	Child Care Services
Essential Utilities	Emergency Financial Assistance
Food Bank/Home-delivered Meals	Food Bank/Home-delivered Meals
Overnight Lodging for Medical Care	Housing Services
Housing Assistance	
Legal Services	Legal Services
Linguistics Services	Linguistic Services
Bus Pass	Medical Transportation Services
Mileage Reimbursement	
Shuttle/Taxi	

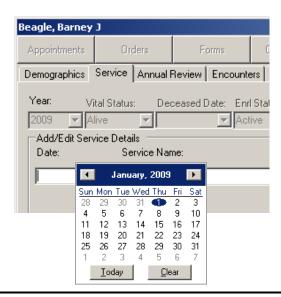
Psychosocial Support Services	Psychosocial Support Services	
Non-medical Case Management	Non-medical Case Management	

Entering Client Services

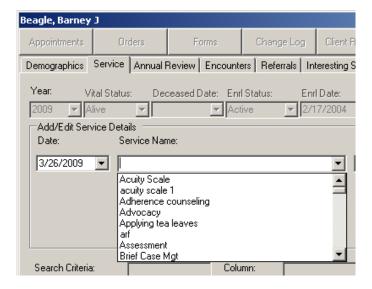
On the Services Tab, press the **New Service** button to begin entering a new service.



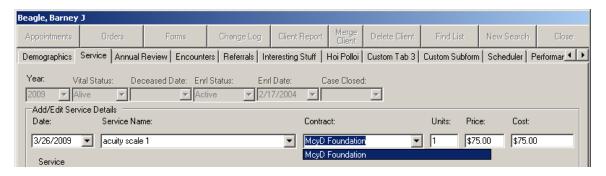
Then enter the date of the service. You can do this manually or by selecting a date from the pull down calendar.



Enter the name of the service. You can use the pull down menu or type the first few letters of the service.



In the contract field, enter the **contract tied to this service**. NMDOH sets up the contracts in CAREWare based upon the approved budget for each provider.



Enter the number of units of service. The default unit price is set by NMDOH based upon the approved Provider budget. If no unit cost is defined in the budget, \$0.00 is used. Enter the price and CAREWare will calculate the cost (units x price).

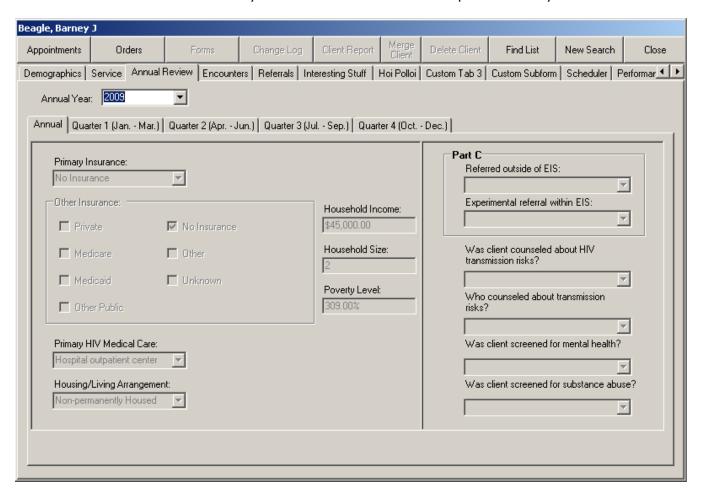
NOTE: By tracking unit cost, your agency will be able to keep a detailed accounting of service costs. The Financial Report will list all units and clients served by sub-service category, along with any financial information, if entered here.

Annual Review Data

Annual Tab

NMDOH adds and updates the client's annual data when applications and updates are approved by the Program. Have view-only access to the Annual Tab.

The Annual tab is activated for a specific service year after at least one service is entered for a client. CAREWare will automatically include information from the prior service year.



Quarterly Tabs

Annual Review sub-tabs collect information on clients on a historical basis. Providers may use these tabs as an option for collecting data not required by HRSA or NMDOH.

Entering Clinical Information

The clinical encounters tab appears **only** if you have user privileges that allow you to view or edit clinical information.

Rapid Entry Screens in Clinical Encounters

Rapid entry screens allow for quick adds and changes to clinical encounter information entered from any date. The encounter-by-encounter screens allow providers to see current information, as well as some information from the previous encounter. By default, all rapid entry screens show you the entire previous year of data, but you can change this to any date range.

Rapid entry screens give providers an overview of a client's historical data in each clinical area. Users can readily produce charts and progress reports that allow for quick review of the medical history for any date range selected. Charting options are available in sub-tabs to plot quantitative values that change over time such as lab results for CD4 count and viral load or any other test, and vital signs.

You can add, edit, or delete information in any of the rapid entry screens.

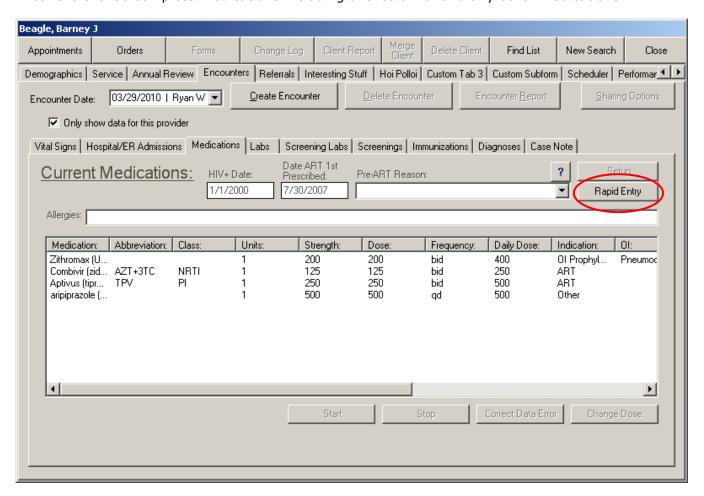
Medications

Medications Rapid Entry

By default, all prescribed medications for the client are shown. You can filter them using the **Indication** field to show only meds for ART, OI prophylaxis, OI treatment, or Other. You can also modify the **Date ART first prescribed** if the client began ART treatment prior to becoming your client, otherwise CAREWare will populate this field with the earliest ART start date entered in the medications.

Entering Medications through Rapid Entry

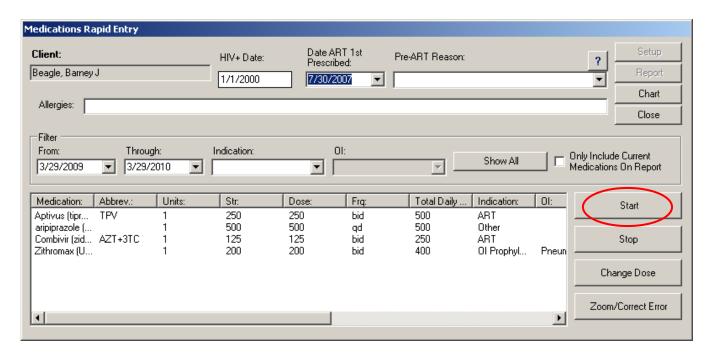
Enter the client's complete medications including antiretroviral and any other medications.



Date ART 1st Prescribed (antiretroviral therapy) defaults to the date of the first HIV medication entered into CAREWare. However, since many clients may have started ART before they come into your care, this field is editable in the *Medications Rapid Entry* screen, and an earlier date may be entered.

Enter any medication allergies in the *Allergies* box. This information will carry over into future clinical encounters.

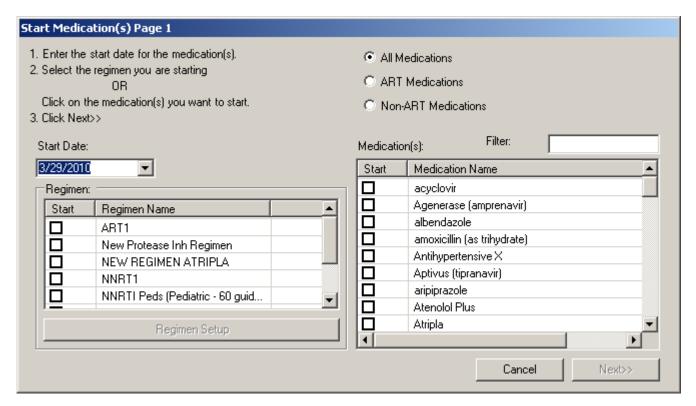
NOTE: Before you start entering medication for individual clients, you may want to go into the *Medications Setup* screen and make sure all the medications are active and properly named for your purposes.



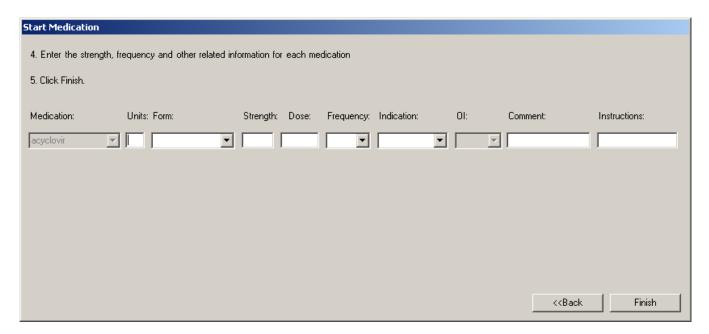
If the client has not begun taking ART medications, select the pre-ART reason in the **Pre-ART Reason** drop down box.

Starting Medications

To start medications, press the **Start** button.



Enter the medication name. You can select it from the pull down menu, or type the first few letters of the medication. Press the **Next** button.



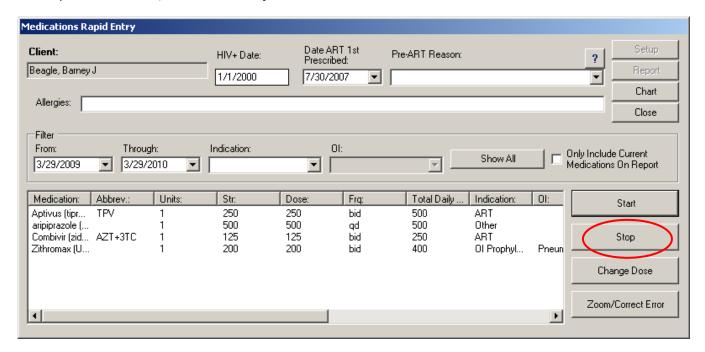
You can add strength and frequency. Indication will be:

- ART (for HIV antiretrovirals)
- OI (opportunistic infection) prophylaxis
- OI treatment
- Other (for medications you may enter that are not related to HIV care)

If the indication is OI prophylaxis or treatment, the OI pull down will become active; select the relevant OI for which the medication(s) is being prescribed as treatment or prophylaxis.

Stopping Medications

To stop a medication, select the **Stop** button.



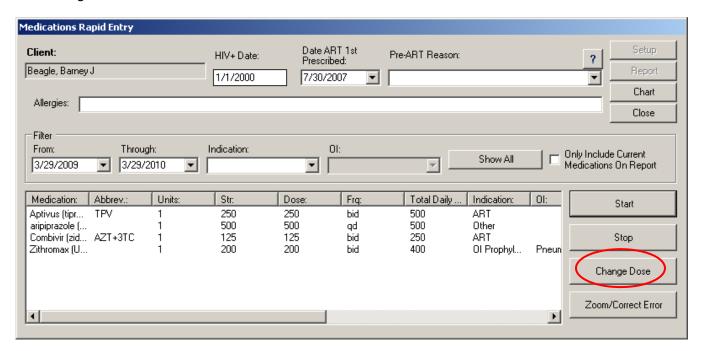
Medications are discontinued because of one of these reasons:

- Virologic Failure: the medication has ceased to be effective in fighting the virus
- Toxicity: the medication has become toxic to the client's system (usually to one or more vital organs, for example, as measured by specific liver function tests or lipids)
- Intolerance: the medication's side effects have become intolerable to the patient
- Lost to follow-up: the patient has stopped receiving treatment
- Dose change: the medication has been re-prescribed with a different dosage
- Therapy completed
- Improved immune function (e.g. when CD4 count goes above 200 cells)
- Stock out/supply disruption
- Other: if you choose, the comment field can be used to elaborate
- Unknown
- Managed treatment interruption
- Non-adherent
- Immunologic failure
- Pregnant
- Risk of pregnancy
- Newly diagnosed TB
- Availability of new drug
- Illness or hospitalization
- Patient lacks sufficient financial resource
- Patient decision

Change Dose

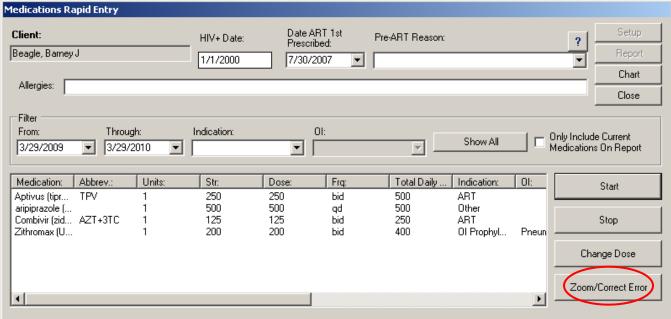
The **Change Dose** button allows you to change the medication's dose, rather than having to stop the medication and restart at a different dose. Information on the prior dose will be retained.

The change date defaults to the current date.



Correcting a Data Error

If you make an error in entering the medication, you can change it through the **Zoom/Correct Data** Error button. You can correct any information entered under the Start or Stop menus.



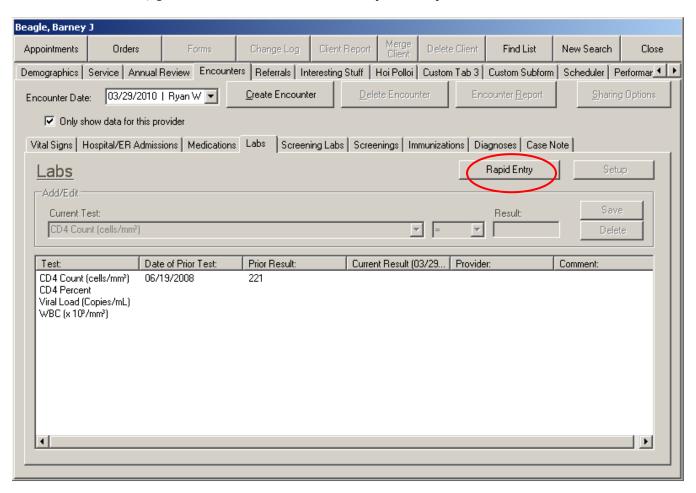
Labs

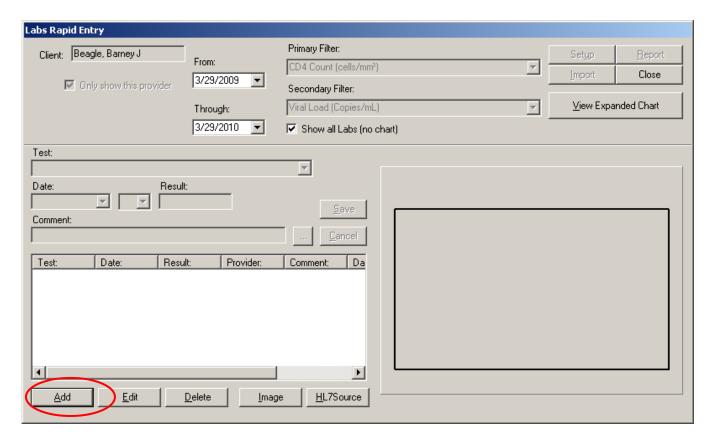
Labs Rapid Entry

By default all labs are shown. You can apply primary and secondary filters (for instance, CD4 and viral load) to view only 1 or 2 labs, view charts, and run reports.

Entering Labs through Rapid Entry

To enter a lab value, go to the Labs tab and select **Rapid Entry**.





- · Select Add.
- In the **Test** field, select a lab from the drop down box, or type the first few letters.
- Enter the value in the **Result** field.
 NOTE: The pull down menu allows values of = (equal to), <= (less than or equal to), and >= (greater than or equal to). For example, an "undetectable" viral load of less than 50 would be entered as <=49.

Screening Labs

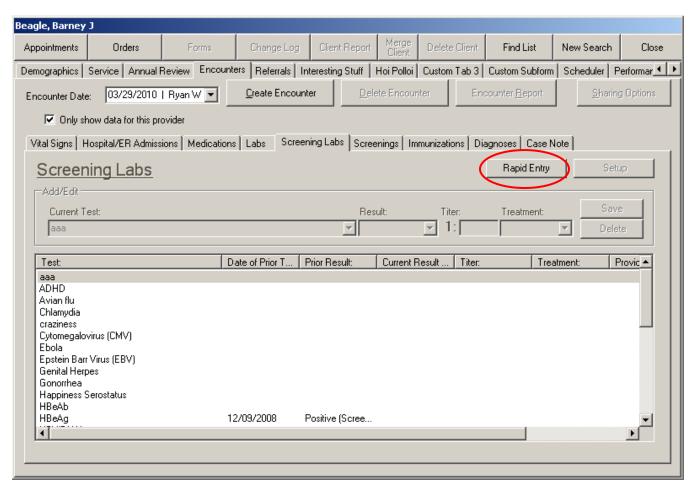
Screening labs allow you to track tests that have a qualitative result, that is, where the result is either positive or negative. For certain tests like syphilis RPR, you can also record the titer.

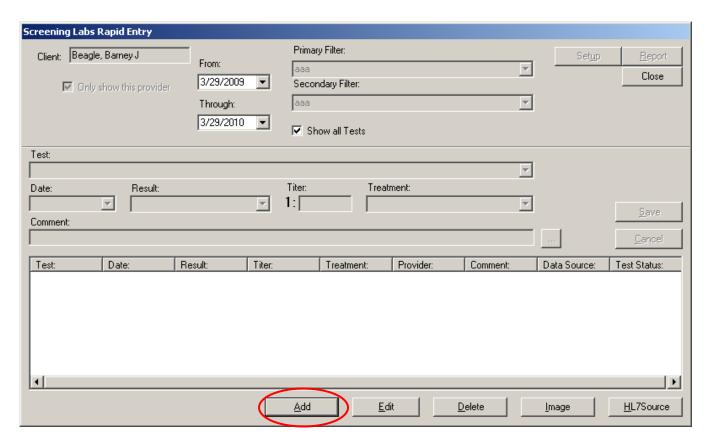
Screening Labs Rapid Entry

This works in the same way as the other tabs, allowing you to specify date ranges and primary and secondary filters and produce basic reports. However, you cannot generate charts from this screen as the values are not chartable.

Entering Screening Labs through Rapid Entry

To enter a screening lab, go to the Screening Labs tab and select **Rapid Entry**.





- Select Add.
- In the **Test** field, select a lab from the drop down box, or type the first few letters.
- Enter the value in the **Result** field.

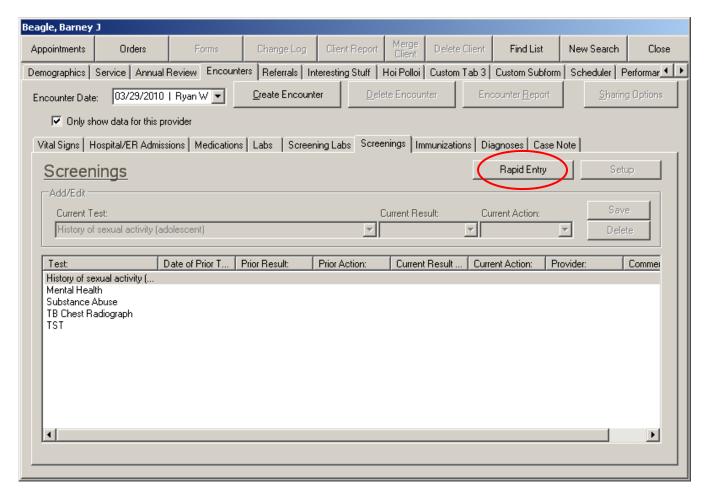
Screenings

Screenings are tests typically performed annually, such as Pap smear, or a TB skin test (TST).

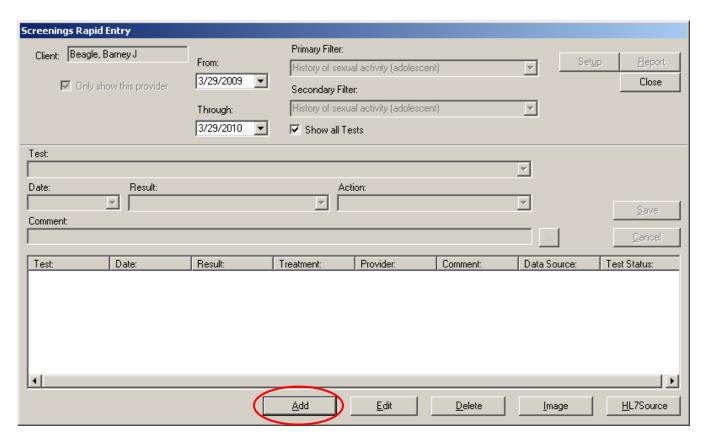
Screening Labs Rapid Entry

This works in the same way as the other tabs, allowing you to specify date ranges and primary and secondary filters and produce basic reports. However, you cannot generate charts from this screen as the values are not chartable.

Entering Screening Labs through Rapid Entry



To enter a screening, go to the Screenings tab and select **Rapid Entry**.



- Select Add.
- In the **Test** field, select a lab from the drop down box, or type the first few letters.
- Enter the value in the **Result** field.

NOTE: Certain screenings such as Pap test and pelvic exam will only appear for female clients.

Immunizations

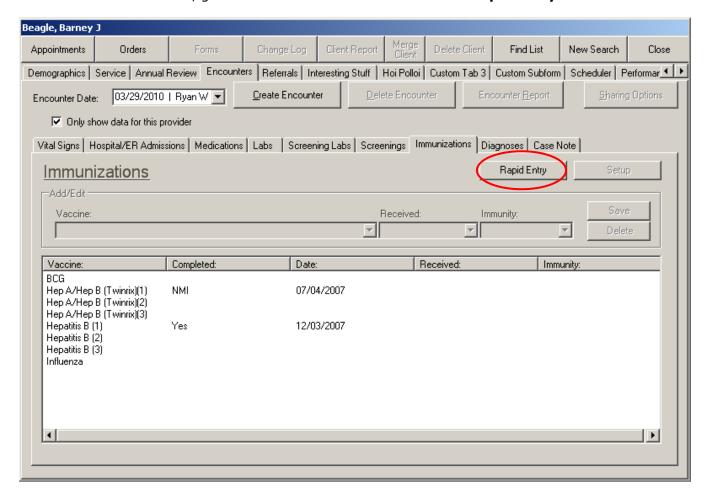
You can enter information on immunizations as they are provided or you can enter a client's immunization history.

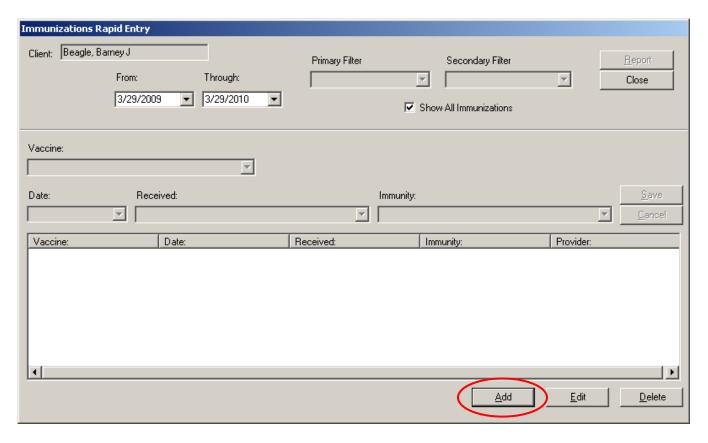
Immunizations Rapid Entry

This works in the same way as the other tabs, allowing you to specify date ranges and primary and secondary filters and produce basic reports. However, you cannot generate charts from this screen as the values are not chartable.

Entering Immunizations through Rapid Entry

To enter an immunization, go to the Immunizations tab and select **Rapid Entry**.





- · Select Add.
- In the Vaccine field, select an immunization from the drop down box, or type the first few letters.
- Enter the value in the Received and Immunity fields.

For clients with a history of hepatitis or previous vaccination series, you can mark their immunization "NMI" (not medically indicated) under the **Received** field, then indicate "History of Infection" or "history of vaccination" under the **Immunity** field. If a client has already been vaccinated, or is known positive from a prior infection, that information should be entered in the Screenings module to record serology.

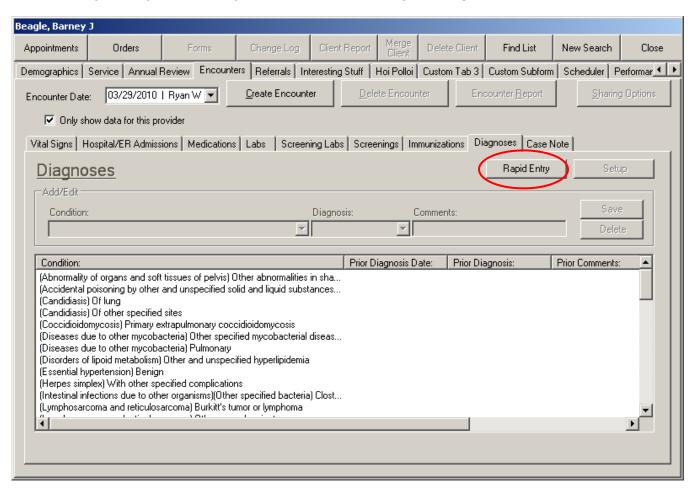
Diagnoses

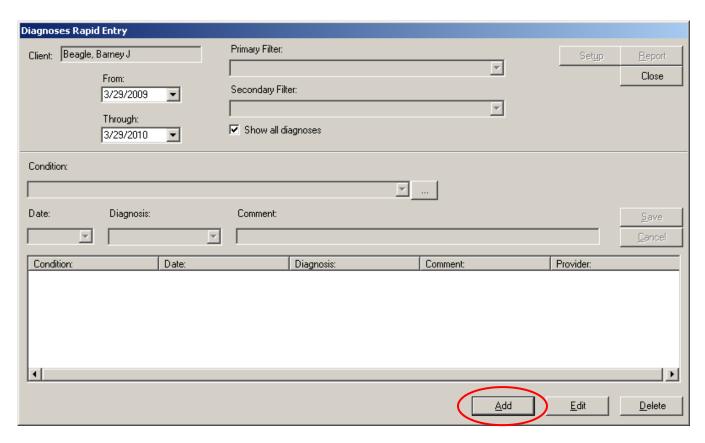
Diagnoses Rapid Entry

This works in the same way as the other tabs, allowing you to specify date ranges and primary and secondary filters and produce basic reports. However, you cannot generate charts from this screen as the values are not chartable.

Entering Diagnoses through Rapid Entry

To enter diagnosis, go to the Diagnoses tab and select **Rapid Entry**.





Enter an ICD-9 diagnosis, and indicate whether the diagnosis is presumptive or definitive.

Referrals

Types of Referrals in CAREWare

There are two types of referrals in CAREWare:

- **Internal** referrals are made between providers who are connected to a central database on a real-time network (for instance, a primary care provider and housing agency both receiving funds from a Part B grantee).
- **External** referrals are made to providers who are not part of the real-time database network managed by the grantee. External referrals are the only type available to standalone users.

Currently the NMDOH CAREWare system is not used for referring clients between providers. Therefore, the **Internal Referral tab is not used**.

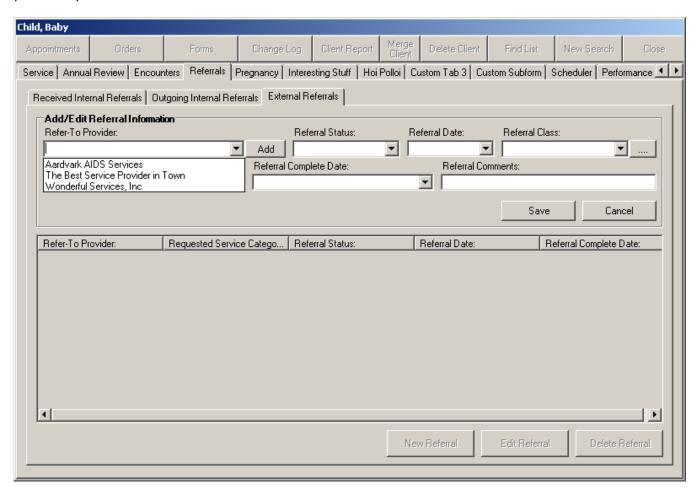
Important Difference between Service and Referral

A service is any service for which a provider pays **any** part. If you refer a client to a dermatologist, for instance, and you pay the co-pay for that visit out of your contract funds, that is a service; enter it in the **Service** tab. If you refer the client and pay no part of the cost of the visit, it is a referral; enter it in the **Referral** tab.

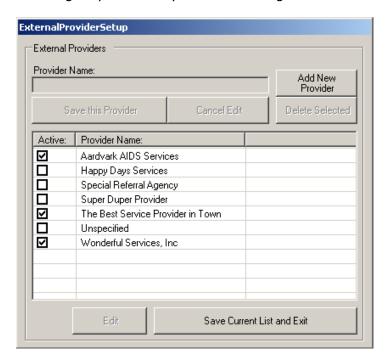
External Referrals

To make an external referral, go to the **Referrals** tab then the **External Referrals** sub-tab.

The **Refer-To Provider** pull down will show you all external providers to whom your agency has previously made referrals.



If the agency to which you are referring the client is not on the list, push the **Add** button.



Select **Add New Provider** and enter the provider name, then select **Save this Provider**.

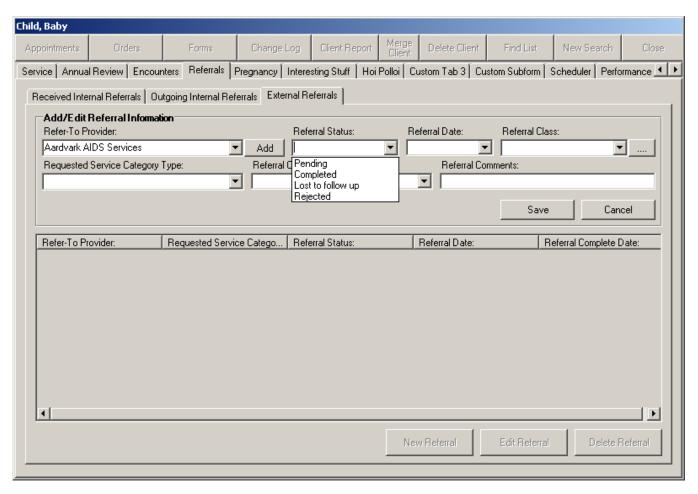
NOTE: You cannot remove providers from the list to whom referrals have already been made, but you can remove them from the pull down menu by un-checking the **Active** box next to their name.

Select the **Referral Status**.

NOTE: New referrals should be marked **Pending**. When the referral's status changes, you can return to this sub-tab, edit the status, and add the date the referral was rejected, completed, or lost to follow-up.

NOTE: If you make a referral for the client and the client rejects the referral right away, enter the referral as rejected.

Enter the date you made the referral.



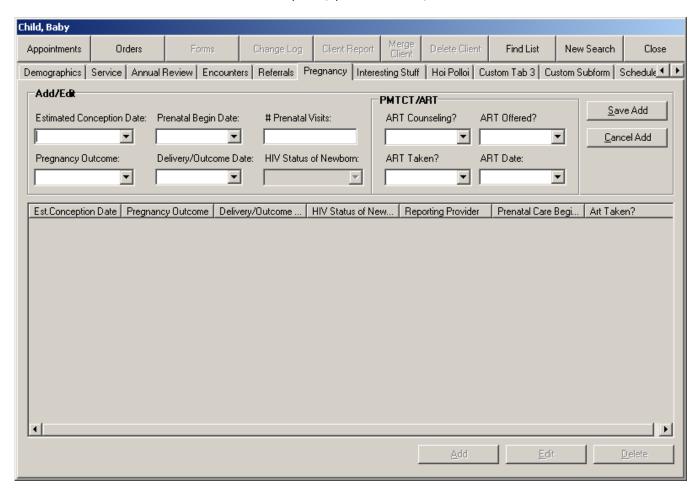
The Referral Class is optional for providers. To set up referral classes, select the ellipsis (...) and set up the referral classes for your organization.

Enter the **Requested Service Category Type**. This is a list of the HRSA service categories.

When the referral is completed, go back into the client's record, change the referral status, and enter a date the referral was completed/closed.

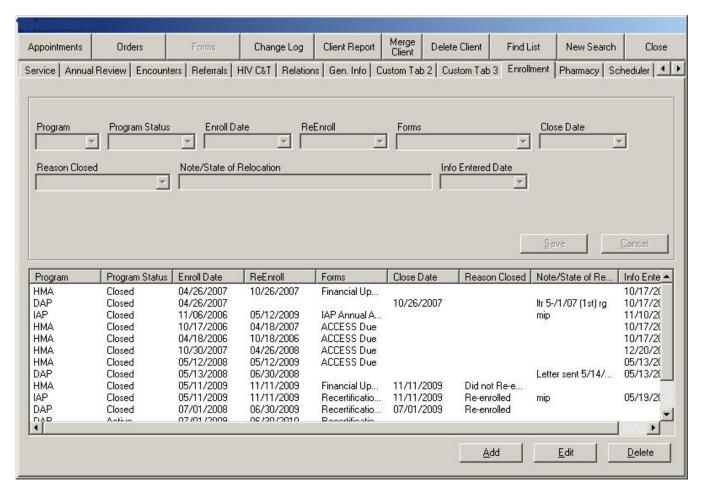
Pregnancy

The Pregnancy tab in CAREWare is activated for female clients only. This tab is optional for Providers and can be used to track conception, prenatal care, and ART data.



Enrollment Tab (Custom Subform)

The Enrollment Tab is maintained by NMDOH to show client enrollment history in the HMA, ADAP, IAP, and Dental Programs. Providers have "view only" access to this tab. The information in this tab is updated when the appropriate paperwork is received by NMDOH and the client's enrollment is approved.



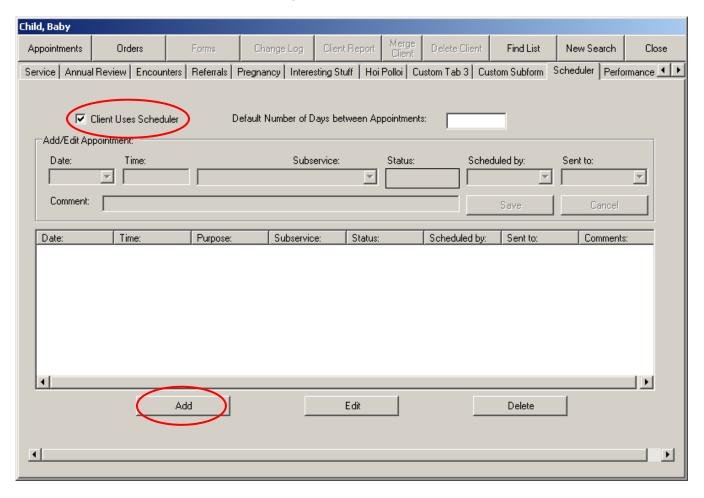
Scheduler

Using the scheduler is optional for providers.

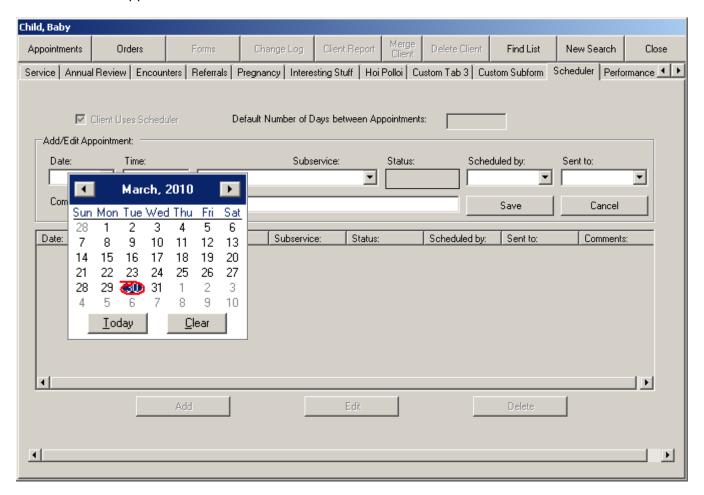
Scheduling Appointments

To schedule an appointment for the client, click on the **Scheduler** tab and click **Add**.

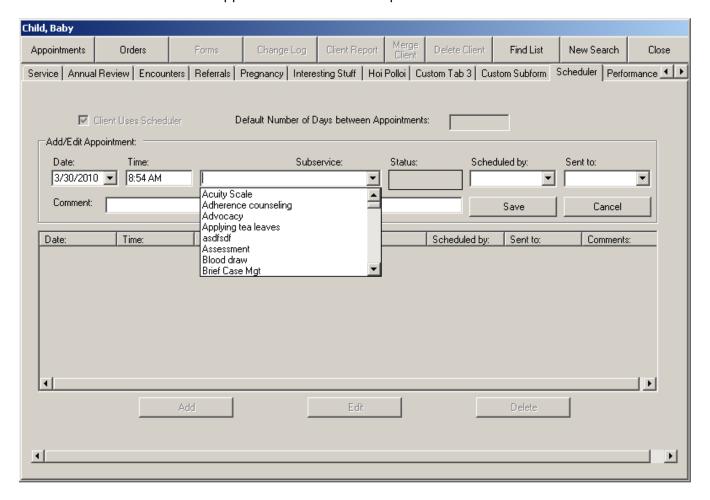
NOTE: If the Add button is not activated, check the Client Uses Scheduler box.



Select the date of the appointment by entering the date or using the drop down calendar. Enter the time of the appointment.

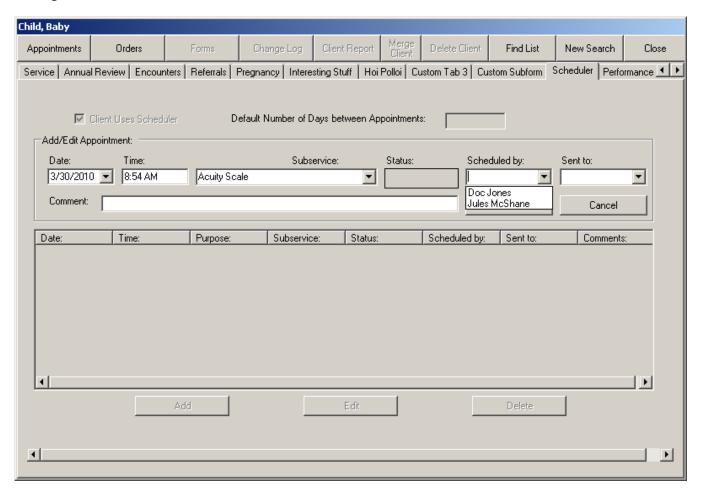


Select the subservice for the appointment from the drop down.



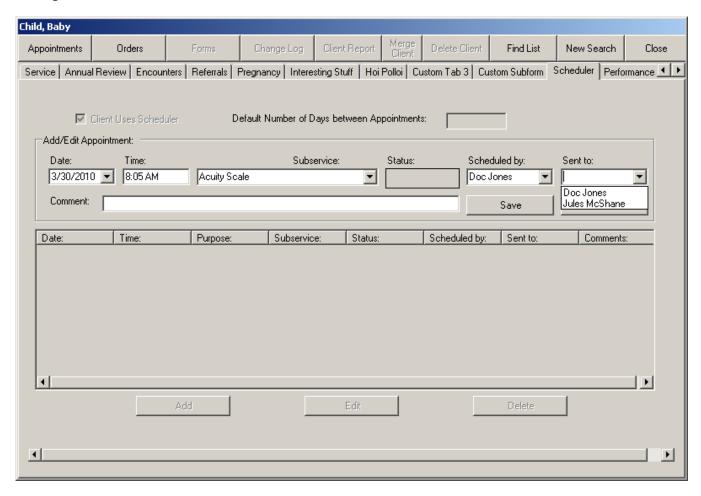
In the **Scheduled by** field, select your name.

NOTE: If the Scheduled by drop down is empty or your name is not listed, contact your Data Manager.



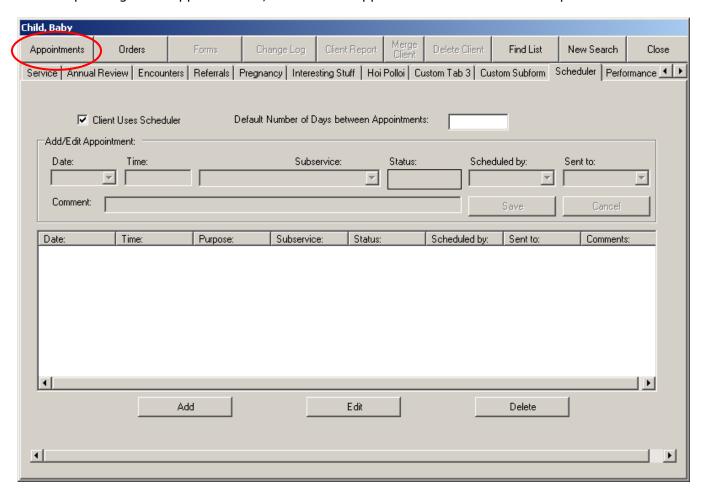
In the **Sent to** field, select the name of the staff member meeting with the client.

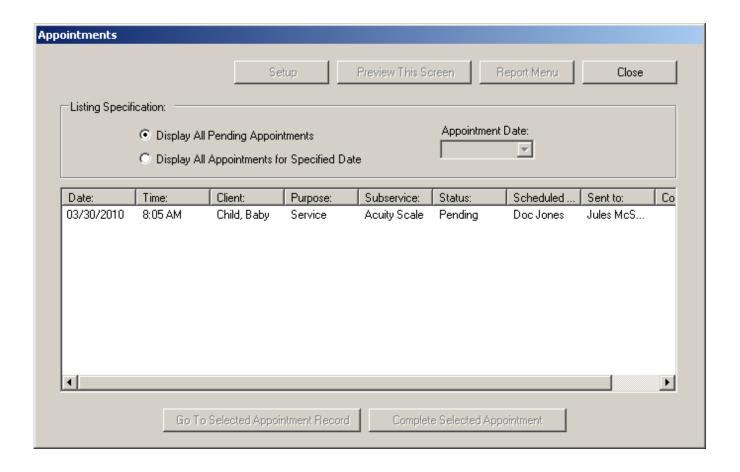
NOTE: If the Scheduled by drop down is empty or your name is not listed, contact your Data Manager.



Viewing Appointments

To view pending or all appointments, click on the Appointments button on the top left corner.

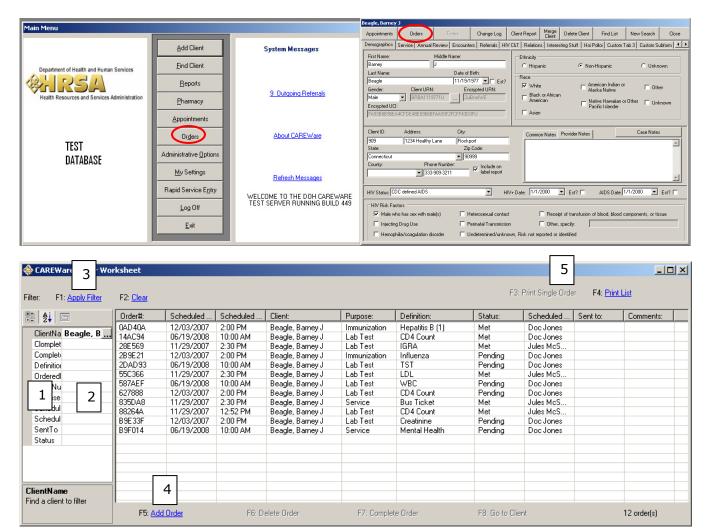




Ordering Services

The Orders Module of CAREWare can be used by providers to create and track orders for services (clinical and non-clinical), labs, screening labs, screenings, and immunizations.

The Order Module can be accessed from the Main Menu or from within the client record.



The main features are numbered above.

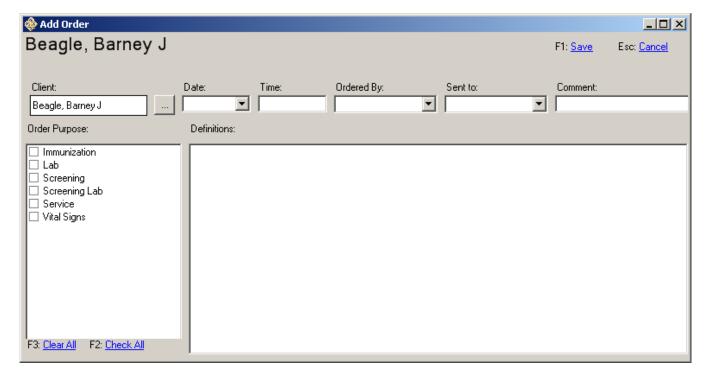
- 1. **Properties:** The items "Client Name" through "Status" are the properties that define the filters used to find specific clients or specific orders. When you click on an item, a short description will show in the lower left corner under the list of properties.
- 2. **Values:** To select a value for a filter, click in the appropriate row in this column. This will cause either the ellipsis (...) to appear or a down arrow for a dropdown box. Orders can be filtered for a specific client, all orders for all clients between specific dates, all orders made by a specific individual, by order status (pending, met, missed), or a combination of properties.
- 3. Click Apply Filter or press F1.

4. Functions

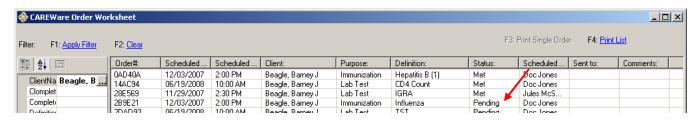
- a. **F5:** Add an order
- b. **F6:** Delete a selected order
- c. F7: Complete an order
- d. F8: Go to client record
- 5. **Reports:** A list of all order or a single order can be printed.

Adding an Order

To add an order click Add Order or F5. This opens the "Add Order" window.



- Enter the date, time, and individual doing the ordering.
- The "Ordered By" list is created in Administrative Options > Employee Setup.
- As you select an item on the left (Order Purpose), the list of possible items to order appear
 on the right (Definitions). The list will expand to the right as you select more categories.
- Once you are done, click Save at the top or click F1. The items you added will show with a status of Pending.



Completing Orders

To complete an order, select the order of interest and then F7 (Complete Order). CAREWare will then take you directly to the screen of interest (i.e., Services tab, Labs tab, etc.) so that the order information can be entered.

Performance Measures

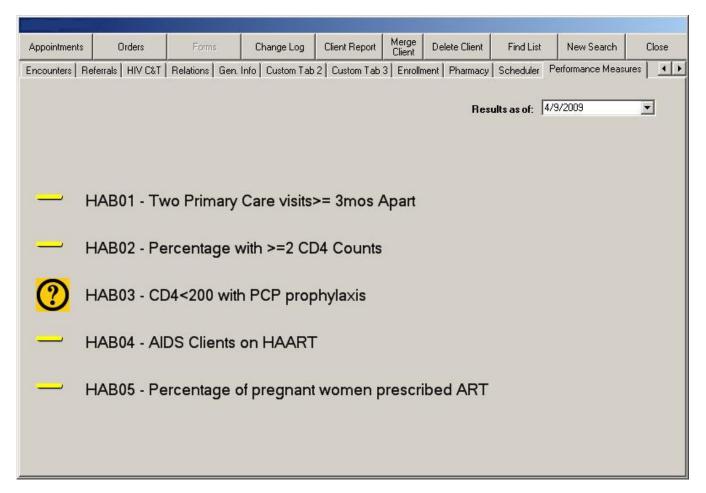
Each client record has a Performance Measures tab that shows where the client falls within each performance measure.

When the tab is first opened, the symbol appears next to each performance measure. This indicates that CAREWare is determining the performance for the client. Once this is complete one of three symbols appears by each performance measure:

Client was not considered for/does not qualify for the performance measure.

Client was considered for/does quality for the performance measure and meets the performance measure. (compliance/performance standard met)

Client was considered for/does quality for the performance measure and does not meet the performance measure. (compliance/performance standard not met)



Running Reports in CAREWare

CAREWare Report Permissions

The following permissions are used for reports in New Mexico CAREWare:

Report	NMDOH Data Manager	Provider Data Manager	Provider Standard Users
Quality of Care Reports			
Run performance measures report	✓	✓	✓
Multiple Client Case Notes Report			
Run multiple client case notes report	✓	✓	✓
Contract Reports			
Run Contract Reports	•		Y
Service Detail Reports Run Service Detail Reports	✓	✓	✓
RDR	•	•	
Run RDR	✓	✓	
Clinical Outcomes			
Run Clinical Outcomes	✓	✓	✓
Custom Reports			_
Run Custom Report	✓	✓	✓
Add/Edit Report Definition	✓	✓	✓
Delete Report Definition	✓	✓	✓
Add/Edit Selection	✓	✓	✓
Delete Selection	✓	✓	✓
Add/Edit Filter	✓	✓	✓
Delete Filter	✓	✓	✓
Financial Reports			
Run Financial Report	✓	√ ¹⁴	
Clinical Encounter Reports			T .
Run Clients with Las Encounter in X Days	✓	✓	✓
Run ARV Ingredient Count Report	✓	✓	✓
Run Clients with No Tests in X Days	✓	✓	✓
Run Clients with No Hepatitis Vaccinations	✓	✓	✓
Run Clients with No RPR in X Days	✓	✓	✓
Run Clients with No Pneumovax in X Months	✓	✓	✓
Run Clients with Last Selected Lab Results	✓	✓	√
Run Clients Ever Diagnosed with Hepatitis	✓	✓	✓
Run Empty Encounter Report	✓	✓	✓

 $^{^{\}rm 14}$ Providers can opt to have fiscal staff access this report.

No Service in X Days			
Run No Service in X Days	✓	✓	✓
Mailing Labels	<u>.</u>		<u> </u>
Run Mailing Labels	✓	✓	✓
Referrals Report	<u>.</u>		<u>.</u>
Run Referrals Report	✓	✓	✓
Encounter Report			
Run Encounter Report	✓	✓	✓
Client Report			
Run Client Report	✓	✓	✓
Rapid Entry Reports			
Run Case Notes	✓	✓	✓
Run Immunizations	✓	✓	✓
Run Diagnoses	✓	✓	✓
Run Labs	✓	✓	✓
Run Medications	✓	✓	✓
Run Referrals	✓	✓	✓
Run Screenings	✓	✓	✓
Run Screening Labs	✓	✓	✓
Run Vital Signs ¹⁵	✓	✓	✓
Scheduler			
Scheduler Reports	✓	✓	✓
User Login Report			
Generate System Login/Logout Report	✓	✓	

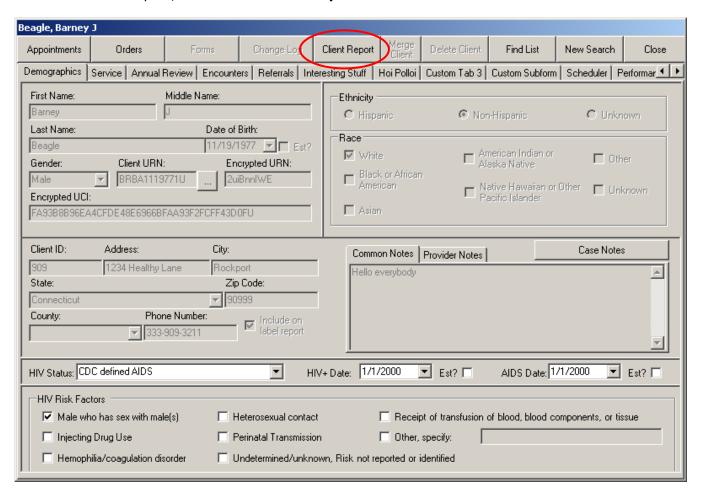
 $^{^{\}rm 15}$ Entering data for vital signs is optional for providers.

Client Report

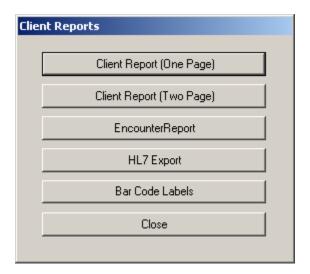
The Client Report provides information entered on the Demographics and Annual Review tabs.

Running the Client Report

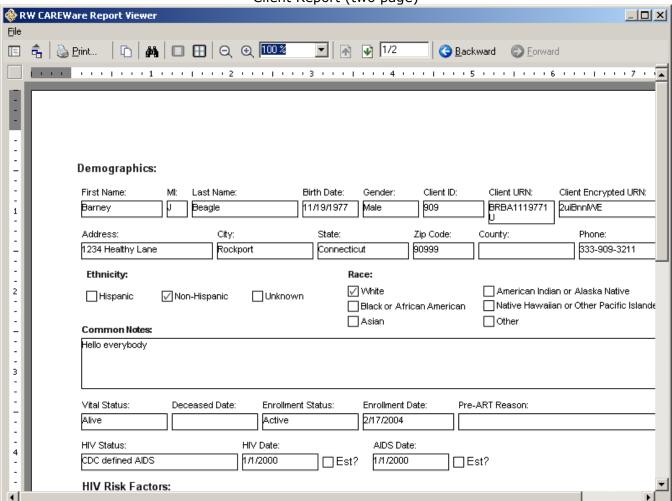
To run the client report, click on the **Client Report** button from the main client screen.



The client report menu offers several viewing options.



Client Report (two page)

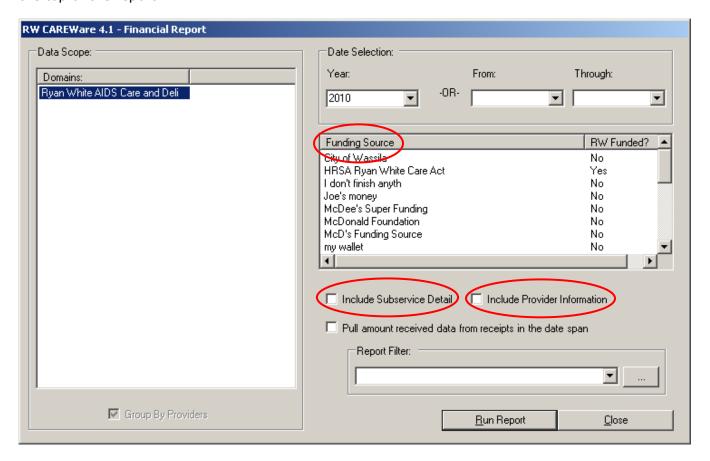


Financial Report

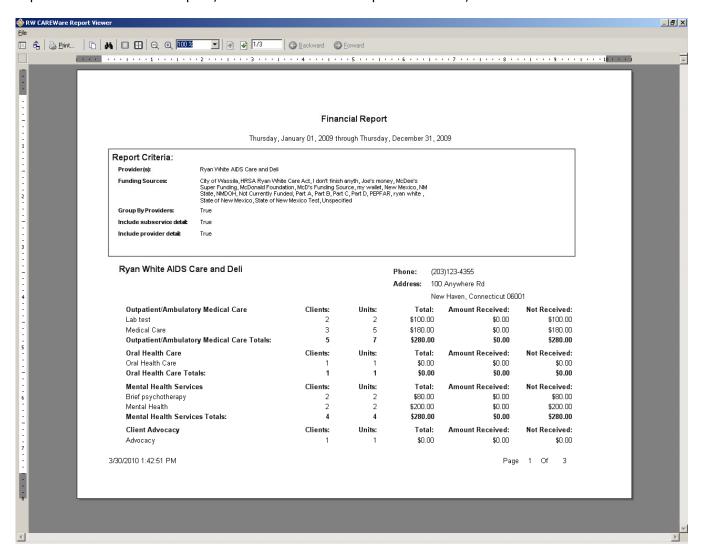
This is an easy to generate report that includes the number of clients and units of service for each service and/or sub-service, the amount expended for each service category over the date range selected (assuming unit service data is entered with each service record entry) and receipt of payments, if any.

The Financial Report can be restricted by funding source of interest, or include all sources of funding.

Check **Include Sub-service Detail** to divide the figures by sub-services within each service category. Check **Include Provider Information** to list the contact information for the agency at the top of the report.

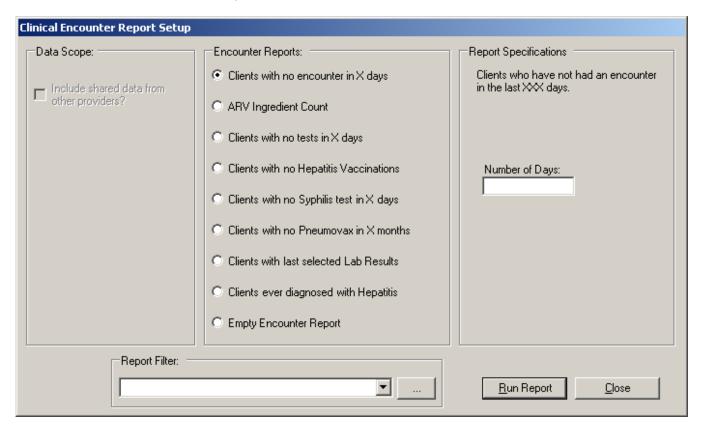


A portion of a financial report, with the sub-service option selected, is shown below.



Clinical Encounter Reports

Clinical encounter reports are a quick way of finding clients who need to be flagged for attention. These pre-built reports address key markers of care for persons with HIV/AIDS, both for preventive care and routine clinical follow-up.



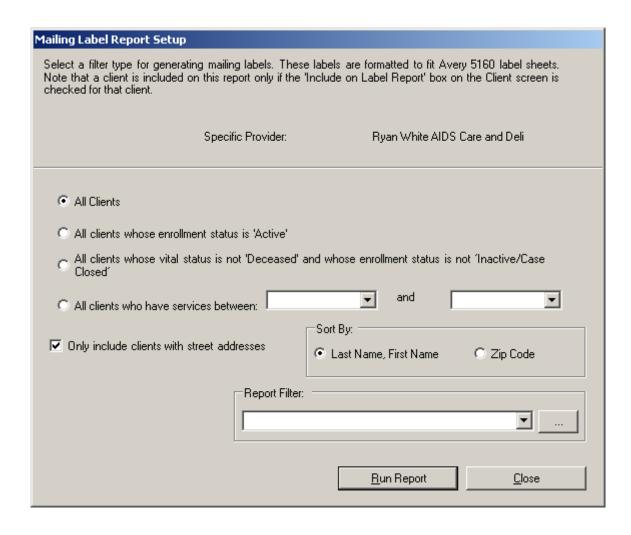
Mailing Labels

You can generate mailing labels for clients with this report, which pre-formats client names and addresses to the Avery 5160 layout.

Only clients who have the **Include on Label Report** box checked on their Demographics screen will be included; to screen out clients who do not wish to receive mail, this box will not be checked in their record.

To generate mailing labels:

- From the Main Menu, select Reports then select Mailing Labels.
- Determine which clients to include by selecting from the four options
 - All clients in the agency's domain in CAREWare
 - o All clients whose enrollment status is Active
 - All clients whose enrollment status is not Service Completed/Case Closed or whose vital status is not Deceased
 - o All clients who have received services for a selected date range
- Check the box **Only include clients with street addresses**. This will omit clients who do not have a mailing address entered in CAREWare.



Exporting Reports

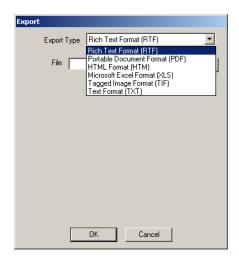
Most CAREWare reports can be exported into a variety of formats, including Portable Document Format (PDF) to be viewed using Adobe Reader and Microsoft Excel.

To export a report:

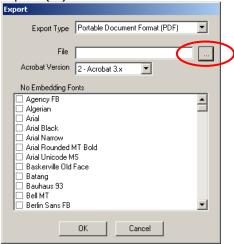
- Run the report
- Select Export from the File menu



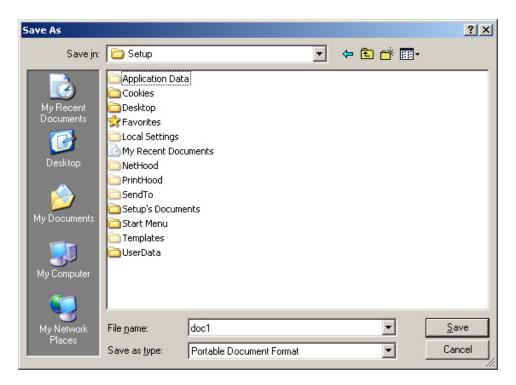
• Select the Export Type (e.g. PDF)



Click on the box with the ellipsis (...) next to the File field



Browse to the location where you wish to save the file



- Enter a name for the exported file in the File name field
- Select **Save**

Administrative Permissions

Function	NMDOH Data Manager	Provider Data Manager
EXPORT MENU		
Provider Data Export	✓	✓
RSR		
Run RSR	✓	✓
PROVIDER SETUP WIZARD Run Setup Wizard		
Set CARE Act Programs	✓	•
Set Service Sharing	V	•
	V	
Enable Category for Provider	✓	
Enable Subservice for Provider	✓	
Add/Edit/Delete Subservice	✓	
Set Clinical Sharing	✓	
Edit Agency and Contact Information	✓	✓
Set Case Notes Sharing	✓	
Set Provider Logo	✓	✓
CLINICAL SETUP		
Import Medication	✓	✓
Set Medication Active/Inactive	✓	✓
Define Labs	✓	✓
Set Labs Active/Inactive	✓	✓
Define Screening Labs	✓	✓
Set Screening Labs Active/Inactive	✓	✓
Define Screenings	✓	✓
Set Screenings Active/Inactive	✓	✓
Import Diagnoses	✓	✓
Set Diagnoses Active/Inactive	✓	✓
Defining Vaccine	✓	✓
Set Vaccine Active/Inactive	✓	✓
USER MANAGER		
Open User Manager	✓	
Add User	✓	
Remove User	✓	
Add Templates	✓	
Edit Templates	✓	
Delete Templates	✓	

Grant/Merge/Revoke/Replace Permissions	✓	
View/Clear User Log Alarm	✓	✓
View/Edit Settings	✓	
Edit My Settings	✓	All Users
CONTRACTS		
Apply Funding Source	✓	
Add/Edit/Delete Funding Source	✓	
View Contracts	✓	✓
Add/Edit/Delete Contract	✓	
Add/Edit Contract Items	✓	
Delete Contract Items	✓	
Merge Subservices	✓	
Import Contracts	✓	
SYSTEM INFO		
View System Info	✓	✓
Edit System Info	✓	✓
SCHEDULER SETUP		
Scheduler Setup	✓	✓
EDIT LISTS		
View Employee	✓	✓
View/Add/Edit Employee (this does not apply to user management or accounts for CAREWare)	✓	✓
Delete Employee (this does not apply to user management or accounts for CAREWare)	✓	✓
QUALITY OF CARE SETUP		
Run Quality of Care Wizard	√	√
Setup Performance Measures	✓	✓

APPENDI	X A: State-wide	CAREWare Us	ser Registratio	n Form

New Mexico CAREWare User Registration Form Request to Add/Remove/Change Access



New Mexico Department of Health

Harold Runnels Building

PHD/IDB HIV Services

INSTRUCTIONS: This form is to be completed by the user and forwarded to the Provider's Authorized Representative for review and approval. Once the form is completed, forward the original signed and approved form to the New Mexico Department of Health's CAREWare Data Coordinator for approval. Keep a copy of this form on file at your agency. If the request for access has been denied, the CAREWare Coordinator and/or HIV Services Program Manager will communicate the rationale to your Provider's Authorized Representative. Please allow two business days to complete your request.

Mail original request to:

	ATTN: J. Eggerton 1190 St. Francis Drive, Suite S-1205 Santa Fe, New Mexico 87502-6110	
Agency Name	Date Requested	
Requestor's Name		
Requestor's Job Title		
User Type		
Requestor's Secret Word The secret word is required when contacting NMDOH for a is not provided, NMDOH will not provide support to the use		
Requestor's Signature		
Requestor's Phone R	Requestor's Email	
Provider's Authorized Representative Name		
Provider's Authorized Representative Phone Number		
Documented HIPAA Certification		
Effective Date Provider's Authorized Representative Signature		
Acknowledgement of Data Privacy Confidentiality Agreement		
Effective Date Provider's Authorized Representative Signature		
NMDOH Internal Use Only		
CAREWare Data Coordinator □ Approved □	Denied Effective Date	



□ New Account

□ Remove Account

□ Change Access Permissions